# **PHAPlans**

5YearPlanforFiscalYears2002 -2006 AnnualPlanforFiscalYear2002

NOTE: THISPHAPLANSTEMPLATE (HUD50075) ISTOBE COMPLETED IN ACCORDANCE WITHINSTRUCTIONS LOCATED IN APPLICABLE PIHNOTICES

# PHAPlan AgencyIdentification

PHAName: NeptuneHousingAuthority PHANumber: NJ48 PHAFiscalYearBeginning:(mm/yyyy) 10/2002 **PublicAccesstoInformation** Informationre gardinganyactivitiesoutlinedinthisplancanbeobtainedby contacting:(selectallthatapply) MainadministrativeofficeofthePHA PHAdevelopmentmanagementoffices **PHAlocaloffices** DisplayLo cationsForPHAPlansandSupportingDocuments The PHAP lans (including attachments) are available for public inspection at: (select all thatapply) MainadministrativeofficeofthePHA PHAdevelopmentmanagementoffic es **PHAlocaloffices** Mainadministrativeofficeofthelocalgovernment MainadministrativeofficeoftheCountygovernment MainadministrativeofficeoftheStategovernment **Publiclibrary PHAwebsite** Other(listbelow) PHAPlanSupportingDocumentsareavailableforinspectionat:(selectallthatapply) MainbusinessofficeofthePHA PHAdeve lopmentmanagementoffices Other(listbelow)

# AnnualPHAPlan PHAFiscalYear2002

[24CFRPart903.7]

i. AnnualPlanType:
SelectwhichtypeofAnnualPlanthePHAwillsubmit.
☐ StandardPlan
StreamlinedPlan:  HighPerformingPHA SmallAgency(<250PublicHousingUnits) AdministeringSection8Only
☐ TroubledAgencyPlan

# ii. ExecutiveSummaryoftheAnnualPHAPlan

[24 CFRPart903.79(r)]

Provideabriefoverviewoftheinformationinthe Annual Plan, including highlights of majorinitiatives and discretionary policies the PHA has included in the Annual Plan.

NotApplicable -refertoPIHNotice99 -51Page3SectionIII,D.

# iii. AnnualPlanTableofContents

[24CFRPart903.79(r)]

 $\label{lem:provide-annual-plan} Provide a table of contents for the Annual Plan documents available for public inspection \quad .$ 

, including attachments, and a list of supporting

### **TableofContents**

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#### **Attachments**

 $Indicate which attach ments are provided by selecting all that apply. Provide the attach ment's name (A, B, etc.) in the space to the left of the name of the attach ment. Note: If the attach ment is provided as a {\bf SEPARATE} file submission from the PHAP lans file, provide the file name in parentheses in the space to the right of the title. \\$ 

Requi	redAttachments:
	AdmissionsPolicyforDeconcentration <u>Attachment</u> A.DeconcentrationPolicy
	FY2002CapitalFundProgramAnnualStatement <u>Attachment</u> B.FY2002CFPAnnualStatement
	$Most recent board \ -approved operating budg \ et (Required Attachment for PHAs that are troubled or a trisk of being design at edit roubled ONLY)$
Op	otionalAttachments:
	PHAManagementOrganizationalChart
	FY2002CapitalFundProgram5YearActionPlan <u>Attachment</u> C.FY2002CFP5YearActionPlan
	PublicHousingDrugEliminationProgram(PHDEP)Plan
	CommentsofResidentAdvisoryBoardorBoards(mustbeattachedifnot includedinPHAPlantext) <u>Attachment</u> D.ResidentComme nts
	Other(Listbelow,providingeachattachmentname) <u>Attachment</u> E.Income,ExclusionsfromIncome,andDeductionsfromIncome  F.ImplementationofPublicHousingResidentCommunityService  Requirement  G.StatementofProgressofAgencyPlanGoals  H. ResidentMembershipofthePHAGoverningBoard  I. MembershipoftheResidentAdvisoryBoard  J. REACFollowUpPlan  K. P/EReport(2000CFP) -03/31/2002  L.P/EReport(2001CFP) -03/31/2002

# ${\bf Supporting Docum\ ents Available for Review}$

Indicatewhichdocumentsareavailableforpublicreviewbyplacingamarkinthe"Applicable&On Display" columnintheappropriaterows. Alllisteddocumentsmustbeondisplayifapplicabletothe programactivities conducted bythe PHA.

	ListofSupportingDocumentsAvailableforR	
Applicable & OnDisplay	SupportingDocument	ApplicablePlan Component
X	PHAPlanCertificationsofCompliancewiththePHAPlans andRelatedRegulations	5YearandAnnualPlans
X	State/LocalGovernmentCertificationofConsistencywith theConsolidatedPlan	5YearandAnnualPlans
X	FairHousingDocumentation: RecordsreflectingthatthePHAhasexamineditsprograms orproposedprograms,identifiedanyimpedimentstofair housingcho iceinthoseprograms,addressedoris addressingthoseimpedimentsinareasonablefashioninview oftheresourcesavailable,andworkedorisworkingwith localjurisdictionstoimplementanyofthejurisdictions' initiativestoaffirmativelyfurtherf airhousingthatrequire thePHA'sinvolvement.	5YearandAnnualPlans
X	ConsolidatedPlanforthejurisdiction/sinwhichthePHAis located(whichincludestheAnalysisofImpedimentstoFair HousingChoice(AI)))andanyadditionalbackupdatato supportstatementofhousingneedsinthejurisdiction	AnnualPlan: HousingNeeds
X	Mostrecentboard -approvedoperatingbudgetforthepublic housingprogram	AnnualPlan: FinancialResources;
X	PublicHousingAdmissionsand(Continued)Occupancy Policy(A&O), whichincludes the Tenant Selection and AssignmentPlan[TSAP]	AnnualPlan:Eligibility, Selection,andAdmissions Policies
X	Section8AdministrativePlan	AnnualPlan:Eligibility, Selection,andAdmissions Policies
X	PublicHousingDecon centrationandIncomeMixing Documentation:  1. PHAboardcertificationsofcompliancewith deconcentrationrequirements(section16(a)oftheUS HousingActof1937,asimplementedinthe2/18/ 99 QualityHousingandWorkResponsibilityActInitial Guidance; NoticeandanyfurtherHUDguidance)and  2. Documentationoftherequireddeconcentrationand incomemixinganalysis	AnnualPlan:Eligibility, Selection,andAdmissions Policies
X	Publichousingrentdeterminationpolicies,includingthe methodologyfors ettingpublichousingflatrents    Checkhereifincludedinthepublichousing A&OPolicy	AnnualPlan:Rent Determination
X	Scheduleofflatrentsofferedateachpublichousing development  checkhereifincludedin thepublichousing A&OPolicy	AnnualPlan:Rent Determination

	ListofSupportingDocumentsAvailableforRe	
Applicable &	SupportingDocument	ApplicablePlan Component
OnDisplay		-
X	Section8rentdetermination(paymentstandard)policies	AnnualPlan:Rent
	checkhereifincludedinSection8	Determination
	AdministrativePlan	
X	Publichousingman agementandmaintenancepolicy	AnnualPlan:Operations
	documents, including policies for the prevention or	andMaintenance
	eradicationofpestinfestation(includingcockroach	
	infestation)	
X	Publichousinggrievanceprocedures	AnnualPlan:Grievance
	checkhe reifincludedinthepublichousing	Procedures
	A&OPolicy	
X	Section8informalreviewandhearingprocedures	AnnualPlan:Grievance
	checkhereifincludedinSection8	Procedures
	AdministrativePlan	
X	TheHU D-approvedCapitalFund/ComprehensiveGrant	AnnualPlan:CapitalNeeds
	ProgramAnnualStatement(HUD52837)fortheactivegrant	_
	year	
	MostrecentCIAPBudget/ProgressReport(HUD52825)for	AnnualPlan:CapitalNeeds
	anyactiveCIAPgrant	
	Mostrecent ,approved5YearActionPlanfortheCapital	AnnualPlan:CapitalNeeds
	Fund/ComprehensiveGrantProgram,ifnotincludedasan	
	attachment(providedatPHAoption)	
	ApprovedHOPEVIapplicationsor,ifmorerecent,	AnnualPlan:CapitalNeeds
	approvedorsubmittedHOPEVIRevital izationPlansorany	
	otherapproved proposal for development of public housing	AnnualPlan:Demolition
	Approvedorsubmittedapplicationsfordemolitionand/or dispositionofpublichousing	andDisposition
	Approvedorsub mittedapplicationsfordesignationofpublic	AnnualPlan:Designation of
	housing(DesignatedHousingPlans)	PublicHousing
	Approvedorsubmittedassessmentsofreasonable	AnnualPlan:Conversionof
	revitalizationofpublichousingandapprovedorsubmitted	PublicHousing
	conversionplansprepar edpursuanttosection202ofthe	
	1996HUDAppropriationsAct	
	Approvedorsubmittedpublichousinghomeownership	AnnualPlan:
	programs/plans	Homeownership
X	PoliciesgoverninganySection8Homeownershipp rogram	AnnualPlan:
	checkhereifincludedintheSection8	Homeownership
	AdministrativePlan	
X	AnycooperativeagreementbetweenthePHAandtheTANF	AnnualPlan:Community
	agency	Service&Self -Sufficiency
X	FSSActionPlan/sfor publichousingand/orSection8	AnnualPlan:Community
		Service&Self -Sufficiency
	Mostrecentself -sufficiency(ED/SS,TOPorROSSorother	AnnualPlan:Community
	residentservicesgrant)grantprogramreports	Service&Self -Sufficiency
X	Themostre centPublicHousingDrugEliminationProgram	AnnualPlan:Safetyand
	(PHEDEP)semi -annualperformancereportforanyopen	CrimePrevention
	grantandmostrecentlysubmittedPHDEPapplication	
**	(PHDEPPlan)	101
X	ThemostrecentfiscalyearauditofthePHAco nducted	AnnualPlan:AnnualAudit

	ListofSupportingDocumentsAvailableforRe	eview
Applicable & OnDisplay	SupportingDocument	ApplicablePlan Component
	undersection5(h)(2)oftheU.S.HousingActof1937(42U. S.C.1437c(h)),theresultsofthatauditandthePHA's responsetoanyfindings	
	TroubledPHAs:MOA/RecoveryPlan Othersupportingdocument s(optional) (listindividually;useasmanylinesasnecessary)	TroubledPHAs (specifyasneeded)

# 1.StatementofHousingNeeds [24CFRPart903.79(a)]

#### A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Basedupo ntheinformationcontainedintheConsolidatedPlan/sapplicabletothejurisdiction,and/or otherdataavailabletothePHA,provideastatementofthehousingneedsinthejurisdictionby completingthefollowingtable.Inthe"Overall"Needscolumn,p rovidetheestimatednumberofrenter familiesthathavehousingneeds.Fortheremainingcharacteristics,ratetheimpactofthatfactoronthe housingneedsforeachfamilytype,from1to5,with1being"noimpact"and5being"severeimpact." Use N/AtoindicatethatnoinformationisavailableuponwhichthePHAcanmakethisassessment.

	Housing	NeedsofF	amiliesint	heJurisdi	ction		
		byl	FamilyTy <sub>]</sub>	pe			
FamilyType	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income<=30%							
ofAMI	778	4	4	4	N/A	4	4
Income>30%but							
<=50%ofAMI	510	3	3	3	N/A	3	3
Income>50%but							
<80% of AMI	578	1	1	1	N/A	1	1
Elderly	1178	N/A	N/A	N/A	N/A	N/A	N/A
Familieswith							
Disabilities	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity							
(White)	1086	2	2	2	N/A	2	2
Race/Ethnicity							
(Black)	661	4	4	4	N/A	4	4
Race/Ethnicity							
(Hispanic)	75	3	3	3	N/A	3	3
Race/Ethnicity							
(Other)	44	3	3	3	N/A	3	3

Whatsour	cesofinformationdidthePHAusetoconductthisanalysi	s?(Checkallthat
apply;allm	naterialsmustbemadeavailableforpublicinspection.)	
⊠ Co	onsolidatedPlanoftheJurisdiction/s	
	Indicateyear:1990	
U.	S. Census data: the Comprehensive Housing Affordability Strategies and the Comprehensive Housing Affordability Affor	tegy
("(	CHAS")dataset	
Ar Ar	mericanHousingSurveydata	
	Indicateyear:	
Ot	therhousingmarketstudy	
	Indicateyear:	
Ot	thersources:(listandindicateyearofinformation)	

# $B.\ Housing Needs of Families on the Public Housing and Section 8\\ Tenant-Based Assistance Waiting Lists$

StatethehousingneedsofthefamiliesonthePHA'swaitinglist/s .Completeonetableforeachtype ofPHA -widewaitinglistadministeredbythePHA. PHAs mayprovideseparatetablesforsite -basedorsub -jurisdictionalpublichousingwaitinglistsattheiroption.

Но	usingNeedsofFamil	liesontheWaitingList	
PublicHousing CombinedSection8a PublicHousingSite	basedassistance ndPublicHousing	risdictionalwaitinglist( lbjurisdiction:	optional)
	#offamil ies	% oftotal families	AnnualTurnover
Waitinglisttotal	866		
Extremelylow			
income<=30% AMI	803	93%	
Verylowincome (>30%but<=50% AMI)	53	6%	
Lowincome (>50%but<80% AMI)	10	1%	
Families with children	402	46%	
Elderlyfamilies	372	43%	
Families with Disabilities	92	11%	
Race/ethnicity (White)	217	25%	
Race/ethnicity (Black)	606	70%	
Race/ethnicity (Hispanic)	35	4%	
Race/ethnicity (other)	8	1%	
Characteristicsby BedroomSize(Public HousingOnly)			

Но	usingNeedsofFamili	esontheWaitingList	t
0BR	330	38%	
1BR	249	28%	
2BR	212	24%	
3BR	63	7%	
4BR	10	1.5%	
5BR	2	0.5%	
5+BR	0	0	
Isthewaitinglistclosed(s	electone)? No	∑Yes	
Ifyes:			
Howlonghasitbe	enclosed(#ofmonths)	? 30	
Doest hePHAex	pecttoreopenthelistint	thePHAPlanyear?	⊠No □Yes
DoesthePHAper generallyclosed	rmitspecificcategories ?  No Yes	offamiliesontothewa	nitinglist, evenif

${f C.Strategy} for {f Addressing Need}$	ed	N	ıngl	essi	ır	d	A	r	0	V)	gy	ite	ra	ti	S.	Ü	(
--	----	---	------	------	----	---	---	---	---	----	----	-----	----	----	----	---	---

ProvideabriefdescriptionofthePHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **INTHEUPCOMINGYEAR**, and the Agency's reasons for choosingthis strategy.

### (1)Strategies

# $\overline{\textbf{Need:Shortag}} \textbf{eofaffordable housing for all eligible populations}$

### Strategy 1. Maximize the number of affordable units available to the PHA within a substantial properties of the properitscurrentresourcesby:

Selecta	ıllthatapply
	Employeffe ctivemaintenanceandmanagementpoliciestominimizethe numberofpublichousingunitsoff -line Reduceturnovertimeforvacatedpublichousingunits Reducetimetorenovatepublichousingunits Seekreplacementofpublichousingunitslosttotheinventorythroughmixed financedevelopment Seekreplacementofpublichousingunitslosttotheinventorythroughsection 8replacementhousingresources Maintainorinc reasesection8lease -upratesbyestablishingpaymentstandards thatwillenablefamiliestorentthroughoutthejurisdiction Undertakemeasurestoensureaccesstoaffordablehousingamongfamilies assistedbythePHA,regardlessofuni tsizerequired Maintainorincreasesection8lease -upratesbymarketingtheprogramto owners,particularlythoseoutsideofareasofminorityandpoverty concentration Maintainorincreasesection8lease -upratesby effectivelyscreeningSection8 applicantstoincreaseowneracceptanceofprogram ParticipateintheConsolidatedPlandevelopmentprocesstoensure coordinationwithbroadercommunitystrategies
	coordinationwithbroadercommunitystrategies
	Other(listbelow)
	egy2:Increasethenumberofaffordablehousingunitsby:  ullthatapply
	Applyforadditionalsection8unitsshouldtheybecomeavailable Leverageaffordablehousingresourcesinthecommunitythroughthe ofmixed -financehousing PursuehousingresourcesotherthanpublichousingorSection8tenant assistance. Other:(listbelow)
Strate	SpecificFamilyTypes:Familiesatorbelow30%ofmedian egy1:Targetavailableassistancetofamiliesatorbelow30%ofAMI
	ExceedHUDfederaltargetingrequirementsforfamiliesatorbelow30% of AMIinpublichousing

<ul> <li>Employadmissionspreferencesaimedatfamilieswitheconomichardships</li> <li>Adoptrentpoliciestosupportandencouragework</li> <li>Other:(listbelow)</li> </ul>
Need: Specific Family Types: Families at orbelow 50% of median
Strategy1:Targetavailableassistanceto familiesatorbelow50%ofAMI Selectallthatapply
Employadmissionspreferencesaimedatfam ilieswhoareworking Adoptrentpoliciestosupportandencouragework Other:(listbelow)
Need:SpecificFamilyTypes:TheElderly
Strategy1: Targetavailableassistancetotheelderly: Selectallthatapply
Seekdesignationofpublichousingfortheelderly Applyforspecial -purposevoucherstargetedtotheelderly,shouldtheybecome available Other:(listbelow)
Need:SpecificFamilyTypes:Familiesw ithDisabilities
Strategy1: TargetavailableassistancetoFamilieswithDisabilities: Selectallthatapply
Seekdesignationofpublichousingforfamilieswithdisabilities Carryoutthemodificationsneededinpu blichousingbasedonthesection504 NeedsAssessmentforPublicHousing Applyforspecial -purposevoucherstargetedtofamilieswithdisabilities, shouldtheybecomeavailable Affirmativelymarkettolocalnon -profita genciesthatassistfamilieswith disabilities Other:(listbelow)  Need:SpecificFamilyTypes:Racesorethnicitieswithdisproportionatehousing needs

# Strategy1:IncreaseawarenessofPHAresourcesamongfamiliesofracesand ethnicities with disproportion at eneeds: Selectifapplicable Affirmativelymarkettoraces/ethnicitiesshowntohavedisproportionate housingneeds Other:(listbelow) Strategy2:Conductactivitiestoaffirmativelyfurt herfairhousing Selectallthatapply $\boxtimes$ Counselsection8tenantsastolocationofunitsoutsideofareasofpovertyor minorityconcentrationandassistthemtolocatethoseunits $\boxtimes$ Marketthesection8programtoowners outsideofareasofpoverty/minority concentrations Other:(listbelow) OtherHousingNeeds&Strategies:(listneedsandstrategiesbelow) (2)ReasonsforSelectingStrategies Ofthefactorslistedbelow, selectall that influence dthePHA'sselectionofthe strategiesitwillpursue: **Fundingconstraints** Staffingconstraints Limitedavailabilityofsitesforassistedhousing Extenttowhichparticularhousing needsaremetbyotherorganizationsinthe community EvidenceofhousingneedsasdemonstratedintheConsolidatedPlanandother informationavailabletothePHA InfluenceofthehousingmarketonPHAprograms Communityprioritiesregardinghousingassistance Resultsofconsultationwithlocalorstategovernment Results of consultation with residents and the Resident Advisory BoardResultsofcons ultationwithadvocacygroups Other:(listbelow) 2. StatementofFinancialResources [24CFRPart903.79(b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federalpublichousingand tenant-basedSection8assistanceprogramsadministeredbythePHAduringthePlan year. Note: the table assumes that Federal public housing orten ant based Section 8 assistance grantfundsareexpendedoneligiblepurposes; therefore, uses of these fun dsneednotbestated.Forother funds, indicate the use for those funds as one of the following categories: public housing operations, publichousingcapitalimprovements, publichousingsafety/security, publichousingsupportives ervices,  $Section 8 tena \ nt-based assistance, Section 8 supportive services or other.$ 

	cialResources:	
PlannedSourcesandUses Sources Planned\$ PlannedUses		
1. FederalGrants(FY2002grants)	·	
a) PublicHousingOperatingFund	921,600	
b) PublicHousingCapitalFund	582,818	
c) HOPEVIRevitalization		
d) HOPEVIDemolition		
e) AnnualContributionsforSection8 Tenant-BasedAssistance	2,176,841	
f) PublicHousingDrugElimination Program(includinganyTechnical Assistancefunds)		
g) ResidentOpportunityandSelf - SufficiencyG rants		
h) CommunityDevelopmentBlockGrant		
i) HOME		
OtherFederalGrants(listbelow)		
FSS	42,141	
2.PriorYearFederalGrants(unobligated fundsonly)(listbelow)		
3.PublicHousingDwellingRentalIncome	1107150	
RentalIncome	1,185,160	Operations
4.Otherincome (listbelow)		
Interest	85,000	Operations
5.Non -federalsources (listbelow)		
LateCharges	15,000	Operations
Sales&Service	1,200	
Commissions&Polling	6,500	
Totalresources	5,016,260	

# 3.PHAP oliciesGoverningEligibility,Selection,andAdmissions

[24CFRPart903.79(c)]

 $\begin{tabular}{ll} A. Public Housing \\ Exemptions: PHAs that do not administer public housing are not required to complete subcomponent \\ \end{tabular}$ 

(1)Eligibility
a. Whendoesthe PHA verifyeli gibility for admission to public housing? (select all that apply)  ☑ When families are within a certain number of being offered a unit: (state number) 3 Months  ☐ When families are within a certain time of being offered a unit: (state time)  ☐ Other: (describe)
b.Whichnon -income(screening)factorsdoesthePHAusetoestablisheligibilityfor admissiontopublichousing(selectallthatapply)?  CriminalorDrug -relatedactivity  Rentalhistory  Housekeeping  Other(describe)
c. \Box Yes \Box No:DoesthePHArequestcriminalrecordsfromlocallaw enforcementagenciesforscreeningpurposes?  d. \Box No:DoesthePHArequestcriminalrecordsfromStatelaw enforcementagenciesforscreeningpurposes?  e. \Box No:DoesthePHAaccessFBIcriminalrecordsfromtheFBIfor screeningpurposes? (eitherdirectlyorthroughanNCIC authorizedsource)
(2)WaitingListOrganization
<ul> <li>a. WhichmethodsdoesthePHAplantousetoorganizeitspublichousingwaitinglist (selectallthatapply)</li> <li>Community-widelist</li> <li>Sub-jurisdictionallists</li> <li>Site-basedwaitinglists</li> <li>Other(describe)</li> </ul>
b.Wheremayinterestedpersonsapplyforadmissiontopublichousing?  PHAmainadministrativeoffice  PHAdevelopment sitemanagementoffice  Other(listbelow)  c.IfthePHAplanstooperateoneormoresite -basedwaitinglistsinthecomingyear, answereachofthefollowingquestions;ifnot,skiptosubsection (3)Assignment

1.Howmanysite -basedwaitinglistswillthePHAoperateinthecoming year?
2. Yes No:AreanyorallofthePHA'ssite -basedwaitinglistsnewforthe upcomingyear(thatis,theyarenotpartofapreviously -HUD-approvedsitebasedwaitinglistplan)?  Ifyes,howmanylists?
3. Yes No:Mayfamiliesbeonmorethanonelistsimultaneously Ifyes,howmanylists?
4.Wherecaninterestedpersonsobtainmoreinformationaboutandsignuptobeon thesite -basedwaitinglists(selectallthatapply)?  PHAmainadministrativeoffice  AllPHAdevelopmentmanagementoffices  Managementofficesatdevelopmentswithsite -basedwaitinglists  Atth edevelopmenttowhichtheywouldliketoapply  Other(listbelow)
a.Howmanyvacantunitchoicesareapplicantsordinarilygivenbeforetheyfalltothe bottomoforareremovedfromthewaitinglist?(selectone)  ☐ One ☐ Two ☐ ThreeorMore
b. Yes No:Isthispolicyconsistentacrossallwaitinglisttypes?
c.Ifanswertobisno,listvariationsforanyotherthantheprimarypu blichousing waitinglist/sforthePHA:
(4)AdmissionsPreferences
a.Incometargeting:  ☐Yes ☐No:DoesthePHAplantoexceedthefederaltargetingrequirementsby targetingmorethan40% of all newadmissionstopu tofamiliesatorbelow30% of median area income?
b.Transferpolicies:

Inwhat	circumstanceswilltransferstakeprecedenceovernewadmissions?(list
below)	
$\boxtimes$	Emergencies
$\boxtimes$	Overhoused
$\boxtimes$	Underhoused
	Medicaljustification
$\boxtimes$	AdministrativereasonsdeterminedbythePHA(e.g.,topermitmodernization
	work)
$\boxtimes$	Residentchoice:(statecircumstancesbelow)
	NeedforHandicappedAccessibleUnits.
	Other:(listbelow)
	eferences
1. <b>X</b> Y	es No:HasthePHAestablishedpreferencesforadmissiontopublic
	housing(otherthandateandtimeofapplication)?(If"no"is
	selected, skiptosubsection (5)Occupancy)
2. Wł	nichofthefollowingadmissionpreferencesdoesthePHAplantoemployinthe
cor	mingyear?(selectallthatapplyfromeitherformerFederalpreferencesorother
pre	eferences)
-	
Forme	rFederalpreferences:
$\boxtimes$	InvoluntaryDispl acement(Disaster,GovernmentAction,ActionofHousing
	Owner, Inaccessibility, Property Disposition)
	Victimsofdomesticviolence
$\overline{\square}$	Substandardhousing
	Homelessness
	Highrentburden( rentis>50percentofincome)
	8
Otherp	references:(selectbelow)
$\boxtimes$ '	Workingfamiliesandthoseunabletoworkbecauseofageordisability
Ħ	Veteransandveterans' families
П	Residentswholiveand/orwork inthejurisdiction
同	Thoseenrolledcurrentlyineducational,training,orupwardmobilityprograms
	Householdsthatcontributetomeetingincomegoals(broadrangeofincomes)
同	Householdsthatcontribut etomeetingincomerequirements(targeting)
П	Thosepreviouslyenrolledineducational, training, or upward mobility
	programs
	Victimsofreprisalsorhatecrimes
	Otherpreference(s)(listbelow)
ш	
3.I fthe	PHAwillemployadmissionspreferences,pleaseprioritizebyplacinga"1"in
	cethatrepresentsyourfirstpriority,a"2"intheboxrepresentingyoursecond

priority, and soon. If you give equal weight to one or more of these choices (ei ther throughanabsolutehierarchyorthroughapointsystem),placethesamenumbernext toeach. Thatmeansyoucanuse"1" morethanonce, "2" morethanonce, etc. 4DateandTime FormerFederalpreferences: InvoluntaryDisplacement(Disas ter,GovernmentAction,ActionofHousing Owner, Inaccessibility, Property Disposition) Victimsofdomesticviolence 2 Substandardhousing Homelessness Highrentburden Otherpreferences(selectallthatapply) Workingfamili esandthoseunabletoworkbecauseofageordisability Veteransandveterans' families Residentswholiveand/orworkinthejurisdiction Thoseenrolledcurrentlyineducational, training, orupwardmobilityprograms Householdsthatcontributetomeetingincomegoals(broadrangeofincomes) Householdsthatcontributetomeetingincomerequirements(targeting) Those previously enrolled ineducational, training, or upward mobility programs Victimsofreprisalsorhatecrimes Otherpreference(s)(listbelow) 4. Relationship of preferences to income targeting requirements: ThePHAappliespreferenceswithinincometiers Notapplicable:thepoolofapplicantfamiliesensuresthatthePHAwillmeet incometargetingrequirements (5)Occupancy sidentsusetoobtaininformation a. Whatreferencematerials can applicants andre about the rules of occupancy of public housing (select all that apply) ThePHA -residentlease ThePHA'sAdmissionsand(Continued)Occupancypolicy PHAbriefingseminar sorwrittenmaterials Othersource(list) b. Howoftenmustresidents notify the PHA of changes in family composition? (selectallthatapply) M Atanannualreexaminationandleaserenewal

	Atfamilyreque Other(list)  A. Afam custo	estforrevis ilymember dy.	sitionchanges sion risaddedthroughbirth,adoptionorca mberisleavingorleftthefamily.	ourtawarded
(6)De	<u>concentration</u>	an dInco	meMixing	
a. 🔯	Yes No:	housing	PHAhaveanygeneraloccupancy(fam developmentscoveredbythedeconce ectioniscomplete.Ifyes,continuetothe	ntrationrule?If
b. 🔲	Yes ⊠No:	aboveor	Cthesecovereddevelopmentshaveave below85% to 115% of the average incoments? If no, this section is complete.	_
Ifyes,	listthesedevelo	pmentsasfo	ol lows:	
		Deconce	ntrationPolicyforCoveredDevelopments	S
Deve	lopmentName :	Number ofUnits	Explanation(ifany)[seestep4at §903.2(c)(1)((iv)]	Deconcentrationpolicy(if noexplanation)[seestep5 at §903.2(c)(1)(v)]

d. Yes No:DidthePHAadoptanychangesto <b>other</b> policiesbasedonthe resultsoftherequiredanalysisoftheneedfordeconcentration ofpovertyandincomemixin g?
e.Iftheanswertodwasyes,howwouldyoudescribethesechanges?(selectallthat apply)
Additional affirmative marketing Actions to improve the marketability of certain developments Adoption or adjustment of ceiling rents for certain developments Adoption of rentincentive stoen courage deconcentration of poverty and income-mixing Other (list below)
f.Basedontheresultsoftherequiredanalysis,inwh ichdevelopmentswillthePHA makespecialeffortstoattractorretainhigher -incomefamilies?(selectallthatapply)  Notapplicable:resultsofanalysisdidnotindicateaneedforsuchefforts List(anyapplicable) developmentsbelow: NJ48-1,NJ48 -3
g.Basedontheresultsoftherequiredanalysis,inwhichdevelopmentswillthePHA makespecialeffortstoassureaccessforlower -incomefamilies?(selectallthatapply)  Notapplicable:resultsof analysisdidnotindicateaneedforsuchefforts List(anyapplicable)developmentsbelow:  B.Section8
Exemptions: PHAsthatdonotadministersection8arenotrequiredtocompletesub -component3B.  Unlessotherwisespecified,a llquestionsinthissectionapplyonlytothetenant assistanceprogram(vouchers, and until completely merged into the voucher program, certificates).
(1)Eligibility
<ul> <li>a.WhatistheextentofscreeningconductedbythePHA?(selectall thatapply)</li> <li>Criminalordrug -relatedactivityonlytotheextentrequiredbylawor regulation</li> <li>Criminalanddrug -relatedactivity,moreextensivelythanrequiredbylawor regulation</li> <li>Moregeneralscre eningthancriminalanddrug -relatedactivity(listfactors below)</li> <li>Other(listbelow</li> </ul>
b. Yes No:DoesthePHArequestcriminalrecordsfromlocallaw enforcementagenciesforscreeningpurposes?

c. Yes No:DoesthePHArequestcriminalrecordsfromStatelaw enforcementagenciesforscreeningpurposes?
d. Yes No:DoesthePHAaccessFBIcriminalrecordsfromtheFBIfor screeningpurposes?(eitherdirectlyorthroughanNCIC - authorizedsource)
e.Indicatewhatkindsofinformationyousharewithprospectivelandlords?(selectall thatapply)  Criminalordrug -relatedactivity  Other(desc ribebelow)
(2)WaitingListOrganization
a.Withwhichofthefollowingprogramwaitinglistsisthesection8tenant assistancewaitinglistmerged?(selectallthatapply)  None Federalpublichousing Federalmoderaterehabilitation Federalproject -basedcertificateprogram Otherfederalorlocalprogram(listbelow)
b.Wheremayinterestedpersonsapplyforadmissiontosection8tenant -based assistance?(selectallthatapply)  PHAmainadministrativeoffice Other(listbelow)
(3)SearchTime
a.  \( \sum \) Yes \( \sum \) No:DoesthePHAgiveextensionsonstandard60 -dayperiodto searchforaun it?
If yes, state circumstances below:  Extenuating circumstances, such as hospitalization or family emergency that affected the family's ability to fundamnit
(4)AdmissionsPreferences
a. Incometargeting

Yes No: DoesthePHAplantoexceedthefederaltargetingrequirementsby targetingmorethan75% of all newadmissions to the section 8 program to families at or below 30% of median area in come?
$\begin{tabular}{lllllllllllllllllllllllllllllllllll$
2. Whichofthefollowing admission preference es does the PHA planto employin the coming year? (select all that apply from either former Federal preferences or other preferences)
FormerFederalpreferences  InvoluntaryDisplacement(Disaster,GovernmentAction,ActionofHousing Owner,Inaccessibility,PropertyDisposition)  Victimsofdomesticviolence  Substandardhousing  Homelessness  Highrentburden(rentis>50percentofincome)
Otherpreferences(sele ctallthatapply)  Workingfamiliesandthoseunabletoworkbecauseofageordisability Veteransandveterans'families Residentswholiveand/orworkinyourjurisdiction Thoseen rolledcurrentlyineducational,training,orupwardmobilityprograms Householdsthatcontributetomeetingincomegoals(broadrangeofincomes) Householdsthatcontributetomeetingincomerequirements(targeting) Thosepreviouslyenrolledineducational,training,orupwardmobility programs Victimsofreprisalsorhatecrimes Otherpreference(s)(listbelow)
3.IfthePHAwillemployadmissionspreferences, pleaseprioritizebyplacinga"1"in thespacethatrepresentsyourfirstpriority,a"2"intheboxrepresentingyour secondpriority,andsoon.Ifyougiveequalweighttooneormoreofthese choices(eitherthroughanabsolutehierarchyorthrou ghapointsystem),placethe samenumbernexttoeach.Thatmeansyoucanuse"1"morethanonce,"2"more thanonce,etc.
4 DateandTime
FormerFederalpreferences

1	InvoluntaryDisplacement(Disaster,GovernmentAction,ActionofHousin Owner,Inaccessibility,PropertyDisposition) Victimsofdomesticviolence	g
2	Substandardhousing Homelessness Highrentburden	
Otherp 3	references(selectallthatapply)  Workingfamiliesandthoseunabletoworkbecau seofageordisability  Veteransandveterans'families  Residentswholiveand/orworkinyourjurisdiction  Thoseenrolledcurrentlyineducational,training,orupwardmobility programs  Householdsthatcontributetomeetingincomegoals(broadrangeof incomes)  Householdsthatcontributetomeetingincomerequirements(targeting)  Thosepreviouslyenrolledineducational,training ,orupwardmobility programs  Victimsofreprisalsorhatecrimes  Otherpreference(s)(listbelow)	
	ongapplicantsonthewaitinglistwithequalpreferencestatus,howare plicantsselected?(selectone)  Dateandtimeofapplication  Drawing(lottery)orotherrandomchoicetechnique	
	PHAplanstoemploypreferencesfor"residentswholiveand/orworkinthe sdiction"(selectone)  Thisp referencehaspreviouslybeenreviewedandapprovedbyHUD  ThePHArequestsapprovalforthispreferencethroughthisPHAPlan	
6.Rela¹ □ ⊠	tionshipofpreferencestoincometargetingrequirements:(selectone) ThePHAappli espreferenceswithinincometiers Notapplicable:thepoolofapplicantfamiliesensuresthatthePHAwillmeet incometargetingrequirements	
(5)Spe	ecialPurposeSection8AssistancePrograms	
elig	ichdocumentsorotherreferenc ematerialsarethepoliciesgoverning ibility,selection,andadmissionstoanyspecial -purposesection8program ninisteredbythePHAcontained?(selectallthatapply)  TheSection8AdministrativePlan Briefingsessionsandwrittenmaterials Other(listbelow)	

<ul> <li>b. HowdoesthePHAannouncetheavailabilityofanyspecial programstothepublic?</li> <li>Throughpublishednotices</li> <li>Other(listbelow)</li> </ul> Conductmeetingswithresidents,communitymembers.	-purposesection8

### 4.PHARentDeterminationPolicies

[24CFRPart903.79(d)]

A.PublicHousing
Exemptions: PHAsthatdonotadminister publichousing are not required to complete sub-component 4A.
(1)IncomeBasedRentPolicies  DescribethePHA's incomebased rentsetting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) incomed is regards and exclusions, in the
appropriatesp acesbelow.
a.Useofdiscretionarypolicies:(selectone)
ThePHAwillnotemployanydiscretionaryrent -settingpoliciesforincome basedrentinpublichousing.Income -basedrentsaresetatthehigherof30% ofadjustedmonthlyin come,10% ofunadjustedmonthlyincome,thewelfare rent,orminimumrent(lessHUDmandatorydeductionsandexclusions).(If selected,skiptosub -component(2))
Or
ThePHAemploysdiscretionarypoliciesfordeterminingincomeb asedrent(If selected,continuetoquestionb.)
b.MinimumRent
1.WhatamountbestreflectsthePHA'sminimumrent?(selectone)  □ \$0 □ \$1-\$25 □ \$26-\$50
2. Xes NoHasthePHAadoptedanydiscretionaryminimumrenthardship exemptionpolicies?
3 If yestoquestion? list the sepolicies helow:

The HA's Admission and Continued Occupancy Policy, Section 13.3 Minimum Rentaddresses hardship exemption in the following way:

"If the family requests a hardship exemption, the Housing Authority will immediately suspend the minimum rent for the family until the Housing Authority can determine whether the hardship exists and whether the hardship is of a temporary or long-term ature.

A. Ahardshipexistsinthefollowingcircumstances:

- 1. Whenthefamilyhaslosteligibilityfororiswaitinganeligibility determinationforaFederal,State,orlocalassistanceprogram;
- 2. Whenthefamilywouldbeevictedasaresultofthe imposition of the minimum rentrequirement;
- 3. Whentheincome of the family has decreased because of changed circumstances, including loss of employment;
- 4. Whenthefamilyhasanincreaseinexpensesbecauseofchanged circumstances,formedicalcosts, childcare,transportation,education, orsimilaritems;
- 5. Whenadeathhasoccurredinthefamily.
- B. Nohardship.IftheHousingAuthoritydeterminesthereisnoqualifying hardship,theminimumrentwillbereinstated,includingrequiringback paymentofminimumrentforthetimeofsuspension.
- C. Temporaryhardship.IftheHousingAuthorityreasonablydeterminesthat thereisaqualifyinghardshipbutthatitisofatemporarynature,the minimumrentwillbenotbeimposedforaperiodof90days fromthedate ofthefamily'srequest.Attheendofthe90 -dayperiod,theminimumrent willbeimposedretroactivelytothetimeofsuspension.TheHousing AuthoritywillofferarepaymentagreementinaccordancewiththeSection 19ofthispolicyforan yrentnotpaidduringtheperiodofsuspension. DuringthesuspensionperiodtheHousingAuthoritywillnotevictthe familyfornonpaymentoftheamountoftenantrentowedforthesuspension period.
- D. Long-termhardship.IftheHousingAuthoritydete rminesthereisalong termhardship,thefamilywillbeexemptfromtheminimumrent requirementuntilthehardshipnolongerexists.
- E. Appeals.Thefamilymayusethegrievanceproceduretoappealthe HousingAuthority'sdeterminationregardingtheha rdship.Noescrow depositwillberequiredinordertoaccessthegrievanceprocedure
- 1. Yes No:DoesthePHAplantochargerentsatafixedamountor percentag elessthan30% ofadjustedincome?

c. Rentssetatlessthan30%thanadjustedincome

2. If yestoabove, list the amounts or percentages charged and the circumstances under which these will be used below:

# Flat rents set at Fair mark et Rent (FMR).

L I	thotthediscretionary(optional)deductions and/orexclusionspolicies does the Aplantoemploy(selectallthat apply)				
	Fortheearnedincomeofapreviouslyunemployedhouseholdmember				
	Forincreasesinearnedincome Fixedamount(otherthan generalrent -settingpolicy) Ifyes,stateamount/sandcircumstancesbelow:				
	Fixedpercentage(otherthangeneralrent -settingpolicy) Ifyes,statepercentage/sandcircumstancesbelow:				
	Forhouseholdheads Forotherfamilymembers Fortransportationexpenses Forthenon -reimbursedmedicalexpensesofnon -disabledornon -elderly families Other(describebelow)				
e.Ceili	ingrents				
	1. Doyouhavece ilingrents?(rentssetatalevellowerthan30%ofadjustedincome) (selectone)				
	Yesforalldevelopments Yesbutonlyforsomedevelopments No				
2. Fo	orwhichkindsofdevelopmentsareceilingrentsi nplace?(selectallthatapply)				
	Foralldevelopments Forallgeneraloccupancydevelopments(notelderlyordisabledorelderlyonly) Forspecifiedgeneraloccupancydevelopments Forcertainpartsofdevelopments; e.g., the high -riseportion				
	Forcertainsizeunits; e.g., larger bedroomsizes				

☐ 100percentofoperatingcostsforgeneralocc upancy(family)developments ☐ Operatingcostsplusdebtservice ☐ The"rentalvalue"oftheunit ☐ Other(listbelow)
f.Rentre -determinations:
1.Betweenincomereexaminations,howoftenmusttenantsr eportchangesinincome orfamilycompositiontothePHAsuchthatthechangesresultinanadjustmentto rent?(selectallthatapply)  Never  Atfamilyoption  Anytimethefamilyexperiencesanincome increase  Anytimeafamilyexperiencesanincomeincreaseaboveathresholdamountor percentage:(ifselected,specifythreshold)  Other(listbelow)  A. Afamilymemberisaddedthroughbirth,adoptionorcourtaward ed custody.  B. Ahouseholdmemberisleavingorleftthefamily.
g. Yes No:DoesthePHAplantoimplementindividualsavingsaccountsfor residents(ISAs)asanalternativetotherequired12month disallowanceofe arnedincomeandphasinginofrentincreases inthenextyear?
(2)FlatRents
<ol> <li>Insettingthemarket -basedflatrents, what sources of information did the PHA use to establish comparability? (select all that apply.)</li> <li>The section 8 re ntreasonableness study of comparable housing</li> <li>Survey of rents listed in local new spaper</li> <li>Survey of similar unassisted units in the neighborhood</li> <li>Other (list/describe below)</li> </ol>
<b>B.Section8Tenant</b> -BasedAssistance
Exemptions: PHAsthatdonotadminister Section 8 tenant - based assistance are not required to complete sub-component 4B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vou chers, and until completely merged into the voucher program, certificates).
(1)PaymentStandards
Describethevoucherpaymentstandardsandpolicies .

a. Whatisthe PHA's payments tandard'? (select the category that best describes your
standard)
Atorabove90% butbelow100% of FMR
≥ 100% of FMR
Above100% butatorbelow110% of FMR
Above110% of FMR (if HUDapproved; describe circumstances below)
Thoret 10/0011 WIR(III10 Dupploved, acceliace incention in the control of the con
h Ifthanormantatandardislawa wthan EMD whyhastha DU A salaatadthis
b.Ifthepaymentstandardislowe rthanFMR,whyhasthePHAselectedthis
standard?(selectallthatapply)
FMRsareadequatetoensuresuccessamongassistedfamiliesinthePHA's
segmentoftheFMRarea
ThePHAhaschosentoserveadditionalfamilies byloweringthepayment
standard
Reflectsmarketorsubmarket
Other(listbelow)
c.IfthepaymentstandardishigherthanFMR,whyhasthePHAchosenthislevel?
(selectallthatapply)
FMRsareno tadequatetoensuresuccessamongassistedfamiliesinthePHA's
segmentoftheFMRarea
Reflectsmarketorsubmarket
Toincreasehousingoptionsforfamilies
Other(listbelow)
d.Howoftenarepaym entstandardsreevaluatedforadequacy?(selectone)
Annually
Other(listbelow)
e.WhatfactorswillthePHAconsiderinitsassessmentoftheadequacyofits
paymentstandard?(selectallthatapply)
Successratesofassistedfamilies
Rentburdensofassistedfamilies
Other(listbelow)
Other(histociow)
(2)MinimumRent
a.WhatamountbestreflectsthePHA'sminimumrent?(selectone)
\$0
\$1-\$25
\$26-\$50
<u> </u>
h Was MaddaghaDHAsdaghadiandian in didi
b. Yes No:HasthePHAadoptedanydiscretionaryminimumrenthardship
exemptionpolicies?(ifyes,listbelow)

5.	Opera	ationsai	ndManag	gement
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[24CFRPart903.79(e)]

 $\label{lem:examptions} Exemptions from \ Component 5: Highperforming and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)$ 

NotRequired -HighPer	former				
A.PHAManagementStr					
DescribethePHA'smanagementstructureandorgan ization.					
(selectone)	and the state of t	•			
AnorganizationchartshowingthePHA'smanagementstructureand					
organizationisatta		1 CI DILA			
	ofthemanagementstructure	andorganizationofthePHA			
follows:					
B.HUDProgramsUn de	erPHAManagement				
<u> </u>	<u> </u>	niliesservedattheheginningofthe			
ListFederalprogramsadministeredbythePHA,numberoffamiliesservedatthebeginningofthe upcomingfiscalyear,andexpectedturnoverineach.(Use"NA"toindicatethatthePHAdoesnot					
operateanyoftheprogramsl					
ProgramName	UnitsorFamilies	Expected			
	ServedatYear	Turnover			
	Beginning				
PublicHousing					
Section8Vouchers					
Section8Certificates					
Section8ModRehab					
SpecialPurposeSection					
8Certificates/Vouchers					
(listindividually)					
PublicHousingDr ug					
EliminationProgram					
(PHDEP)					
OtherFederal					
Programs(list					
individually)					
•					
	•	·			

#### **C.ManagementandMaintenancePolicies**

ListthePHA'spublichousingmanagementandmaintenancepolicydocuments,manualsandhandbooks thatcontaintheAgency'sr ules,standards,andpoliciesthatgovernmaintenanceandmanagementof publichousing,includingadescriptionofanymeasuresnecessaryforthepreventionoreradicationof

pest infestation (which includes cockroach infestation) and the policies governinm an agement.

gSection8

- (1) Public Housing Maintenance and Management: (list below)
- (2)Section8Management:(listbelow)

# 6. PHAGrievanceProcedures

Exemptionsfromcomponent6:Highperformin gPHAsarenotrequiredtocompletecomponent6. Section8 -OnlyPHAsareexemptfromsub -component6A.

### NotRequired -HighPerformer

A. PublicHousing  1. Yes No:HasthePHAestablishedanywrittengrievanceprocedures in additiontofederalrequirementsfoundat24CFRPart966, SubpartB,forresidentsofpublichousing?
Ifyes, list additions to federal requirements below:
<ul> <li>2.WhichPHAofficeshouldresidentsorapplicantstopublichousingcontactto initiatethe PHAgrievanceprocess?(selectallthatapply)</li> <li>PHAmainadministrativeoffice</li> <li>PHAdevelopmentmanagementoffices</li> <li>Other(listbelow)</li> </ul>
B.Section8Tenant -BasedAssistance  1. Yes No:HasthePHAestablishedinformalreviewproceduresforapplicants totheSection8tenant -basedassistanceprogramandinformal hearingproceduresforfamiliesassistedbytheSection8tenant -basedassistanceprograminadditiontofe deralrequirements foundat24CFR982?
Ifyes, list additions to federal requirements below:
<ul> <li>2.WhichPHAofficeshouldapplicantsorassistedfamiliescontacttoinitiatethe informalreviewandinformalhearingprocesses?(selectallthatapply)</li> <li>PHAmainadministrativeoffice</li> <li>Other(listbelow)</li> </ul>
7 CanitalImprovementNeeds
7.CapitalImprovementNeeds [24CFRPart903.79(g)]

mayskipt oComponent8. A.CapitalFundActivities Exemptionsfromsub -component7A:PHAsthatwillnotparticipateintheCapitalFundProgrammay skip to component 7B. All other PHA smust complete 7A as instructed.(1)CapitalFundProgramAnnualStateme UsingpartsI,II,andIIIoftheAnnualStatementfortheCapitalFundProgram(CFP),identifycapital activitiesthePHAisproposingfortheupcomingyeartoensurelong -termphysicalandsocialviability ofitspublichousingdevelopments.Thissta tementcanbecompletedbyusingtheCFPAnnual StatementtablesprovidedinthetablelibraryattheendofthePHAPlantemplate **OR**.atthePHA's -52837. option, by completing and attaching a properly updated HUD Selectone:  $\boxtimes$ The Capi tal Fund Program Annual Statement is provided as an attachment to thePHAPlanatAttachment(statename) **AttachmentB** -or-The Capital Fund Program Annual Statement is provided below: (if selected, copytheCFPAnnualSta tementfromtheTableLibraryandinserthere) (2)Optional5 -YearActionPlan Agenciesareencouragedtoincludea5 -YearActionPlancoveringcapitalworkitems.Thisstatement canbecompleted by using the 5 Year Action Plantable provided in the ta blelibraryattheendofthe PHAPlantemplate **OR**bycompletingandattachingaproperlyupdatedHUD -52834. a. Yes | No:IsthePHAprovidinganoptional5 -YearActionPlanforthe CapitalFund?(ifno,skiptosub -component7B) b.Ifyestoquestiona, selectone: The Capital Fund Program 5 - Year Action Planis provided as an attachment to thePHAPlanatAttachment(statename) **AttachmentC** -or-The Capital Fund Program 5 - Year Action Planis provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and inserthere)

ExemptionsfromComponent7:Section8onlyPHAsarenotrequiredtocompletethiscomponentand

B.HOPEVIandPublicHousingDevelopmentandReplacement

**Activities(Non - Capital Fund)** 

Applicabilityofsub -component7B:AllPHAsadministeringpublichousing.Identifyanyapproved HOPEVIand/orpublichousingdevelopmentorreplacementactivitiesnotdescribedintheCapitalFund ProgramAnnualStatement.			
☐Yes ☐No:a)HasthePHAreceivedaHOPEVIrevitalizationgrant?(ifno, skiptoquestionc;ifyes,provideresponsestoquestionbfor eachgrant,copyingandcompletingasmanytimesasnecessary) b)StatusofHOPEVIrevitalizationgrant(completeonesetof questionsforeachgrant)			
1.Developmentname:			
2.Development(project)number:			
3.Statusofgrant:(selectthestatementthatbestdescribesthecurrent status)			
RevitalizationPlanunderdevelopment RevitalizationPla nsubmitted,pendingapproval RevitalizationPlanapproved ActivitiespursuanttoanapprovedRevitalizationPlan underway			
☐Yes ☐No:c)DoesthePHAplantoapplyforaHOPEVIRe inthePlanyear?  Ifyes,listdevelopmentname/sbelow:			
Yes No:d)WillthePHAbeengaginginanymixed -financedevelopment activitiesforpublichousinginthePlanyear?  Ifyes,listdeve lopmentsoractivitiesbelow:			
Yes No:e)WillthePHAbeconductinganyotherpublichousing developmentorreplacementactivitiesnotdiscussedinthe CapitalFundProgramAnnualStatement?  Ifyes,listdevelopm entsoractivitiesbelow:			
8. DemolitionandDisposition [24CFRPart903.79(h)] Applicabilityofcomponent8:Section8onlyPHAsarenotrequiredtocompletethissection.			
11			

1. □Yes ⊠No:	DoesthePHAplantoc onductanydemolitionordisposition activities(pursuanttosection18oftheU.S.HousingActof 1937(42U.S.C.1437p))intheplanFiscalYear?(If"No", skiptocomponent9;if"yes",completeoneactivitydescription foreachdevelopment.)		
2.Acti vityDescription	1		
□Yes □No:	HasthePHAprovidedtheactivitiesdescriptioninformationin the <b>optional</b> PublicHousingAssetManagementTable?(If "yes",skiptocomponent9.If"No",completetheActivity Descriptiontablebelow.)		
	Demolition/DispositionActivityDescription		
1a.Developmentname	<b>:</b>		
1b.Development(proj			
2.Activitytype:Demol			
Dispos			
3.Applicationstatus(se	siectone)		
Approved	dia communat		
Submitted,per	~ · · <u> </u>		
Plannedapplic	<del></del>		
	roved,submitted,orplannedforsubmission: (DD/MM/YY)		
5. Number of units affect			
6.Coverageofaction(se			
Partofthedevelopm	ent		
Totaldevelopment			
7. Timeline for activity:			
	jectedstartdateofactivity:		
b.Projectedend	ddateofactivity:		
9. Designation of	PublicHousingforOccupancybyElderlyFamilies		
orFamilieswitl	hDisabilitiesorElderlyFamiliesandFamilieswith		
[24CFRPart903.79(i)]			
orFamilieswitl Disabilities			

ExemptionsfromComponent9;Section8onlyPHAsarenotrequiredtocompletethissection.				
doestloccup disabi orwill famili andfa U.S.H fiscal oneac iselig	hePHAdesignatedorappliedforapprovaltodesignateor hePHAplantoapplytodesignateanypublichousingfor bancyonlybytheelderlyfamiliesoronlybyfamilieswith hilities, or byelderlyfamiliesandfamilieswithdisabilities lapplyfordesignationforoccupancybyonlyelderly hiesoronlyfamilieswithdisabilities, orbyelderlyfamilies milieswithdisabilitiesasprovidedbysection7ofthe HousingA ctof1937(42U.S.C.1437e)intheupcoming year? (If"No", skiptocomponent10.If"yes", complete trivitydescriptionforeachdevelopment, unless the PHA hibletocomplete astreamlined submission; PHAs letingstreamlined submissionsmayskiptocomponent			
2.ActivityDescription				
Yes No: Hasth inform Asset	nePHAprovidedallrequiredactivitydescription mationforthiscomponentinthe <b>optional</b> PublicHousing ManagementTable?If"ye s",skiptocomponent10.If ,completetheActivityDescriptiontablebelow :			
Designation	onofPublicHousingActivityDescription			
1a.Developmentname:	<u> </u>			
1b.Development(project)numb	er:			
2.Designationtype:				
Occupancybyonlythee	·			
Occupancybyonlyelde	rlyfamiliesandfamilieswithdisabilities			
3.Applicationstatus(selectone)				
	hePHA'sDesignationPlan			
Submitted, pending approval				
Plannedapplication	]			
	d,submitted,orplannedforsubmission: (DD/MM/YY)			
5.Ifapproved, will this designation New Designation Plan	onconstitutea(selectone)			
Revisionofapreviously -approvedDesignationPlan?				
6. Numberofunitsaffected:				
7.Coverageofaction(selectone)				
Partofthedevelopment				
Totaldevel opment				
10. ConversionofPublic [24CFRPart903.79(j)] ExemptionsfromComponent10;Se	cHousingtoTenant -BasedAssistance ection8onlyPHAsarenotrequiredtocompletethissection.			

#### A.AssessmentsofReasonableRevitalizationPursuanttosection202 oftheHUD FY1996HUDAppropriationsAct 1. $\square$ Yes $\square$ No: HaveanyofthePHA's developments or portions of developmentsbeenidentifiedbyHUDorthePHAascovered undersection 202 of the HUDFY 1996 HUDAppropriatio ns Act?(If"No",skiptocomponent11;if"yes",completeone activitydescriptionforeachidentifieddevelopment,unless eligibletocompleteastreamlinedsubmission.PHAs completingstreamlinedsubmissionsmayskiptocomponent 11.) HighPerformer - StreamlinedSubmission 2. Activity Description Yes No: HasthePHAprovidedallrequiredactivitydescription informationforthiscomponentinthe **optional**PublicHousing AssetManagementTable?If"yes",skiptoc omponent11.If "No", complete the Activity Description table below. ConversionofPublicHousingActivityDescription 1a.Developmentname: 1b.Development(project)number: 2. Whatisthestatusoftherequired assessment? Assessemtunderway AssessmentresultssubmittedtoHUD AssessmentresultsapprovedbyHUD(ifmarked,proceedtonext question) Other(explainbelow) 3. **Yes** aConversionPlanrequired?(Ifyes,gotoblock4;ifno,goto No:Is block5.) 4. Status of Conversion Plan (select the statement that best describes the currentstatus) ConversionPlanindevelopment ConversionPlan submittedtoHUDon:(DD/MM/YYYY) ConversionPlanapprovedbyHUDon:(DD/MM/YYYY) ActivitiespursuanttoHUD -approvedConversionPlanunderway 5.Description of how requirements of Section 202 are being satisfied b ymeansother thanconversion(selectone)

\_\_\_\_\_

UnitsaddressedinapendingorapprovedHOPEVIRevitalizationPlan

Unitsaddressedinapendingorapproveddemolitionapplication(date

UnitsaddressedinapendingorapprovedHOPEVIdemolitionap

submittedorapproved:

(datesubmittedorapproved:

plication

□Re	(datesubmittedorappi equirementsnolongerapplicable equirementsnolongerapplicable her:(describebelow)	:vac ancy	) vratesarelessthan essthan300units	10percent
B.Voluntary	ConversionInitialAssessmen	ts		
a) Howman Assessme	yofthePHA'sdevelopmentsares ents?	s ubjectto	theRequiredIniti	al
Assessme	yofthePHA'sdevelopmentsarer entsbasedonexemptions(e.g.,elo ecupancyprojects)?			
c) Howman	yAssessmentswer econducted	lforthePHA's	scovereddevelopi	ments?
•	HAdevelopmentsthatmaybeapp InitialAssessments:	propriateforc	onversionbasedo	nthe
	DevelopmentName	Numb	erofUnits	]
	hasnotcompletedtheRequiredIsessments:	nitialAs	sessments,descr	ibethestatus
oftheseas	-		,	

A.PublicHousing				
Exemptions from Compone	ent11A:Section8onlyPHAsarenotrequiredtocomplete11A.			
1. □Yes ⊠No:	DoesthePHAadministeranyhomeownershipprograms administeredbythePHAunderanapprovedsection5(h) homeownershipprogram( 42U.S.C.1437c(h)),oranapproved HOPE Iprogram(42U.S.C.1437aaa)orhasthePHAapplied orplantoapplytoadministeranyhomeownershipprograms undersection5(h),theHOPEIprogram,orsection32ofthe U.S.HousingActof1937(42U.S.C.1437z -4).(If"No",skip tocomponent11B;if"yes",completeoneactivitydescription foreachapplicableprogram/plan,unlesseligibletocompletea streamlinedsubmissiondueto <b>smallPHA</b> or <b>highperforming PHA</b> status.PHAscompletingstreamlinedsubmissio nsmay skiptocomponent11B.)			
2.ActivityDescription ☐Yes ☐No:	HasthePHAprovidedallrequiredactivitydescriptioninformationforthis componentinthe <b>optional</b> PublicHousingAssetManagementTable?(If "yes", skiptocomponent12.If "No",completetheActivityDescription tablebelow.)			
PublicHousingHomeownershipActivityDescription				
	Completeoneforeachdevelopmentaffected)			
1a.Developmentname 1b.Development(proje				
2.FederalProgramauth				
☐HOPEI ☐5(h) ☐TurnkeyIII	ftheUSHAof1937(effective10/1/99)			
3.Applicationstatus:(s				
Approved;i	ncludedinthePHA'sHomeo wnershipPlan/Program pendingapproval			
4.DateHomeownershi	pPlan/Programapproved,submitted,orplannedforsubmission:			
(DD/MM/YYYY)				
5. Numberofunitsaff				
6.Coverageofaction:(s	•			
Partofthedevelopm	ent			
Totaldevelopment				
B.Section8Tenant	tBasedAssistance			

1. □Yes ⊠No:	DoesthePHAplantoadministeraSection8H omeownership programpursuanttoSection8(y)oftheU.S.H.A.of1937,as implementedby24CFRpart982?(If"No",skiptocomponent 12;if"yes",describeeachprogramusingthetablebelow(copy andcompletequestionsforeachprogramidentified),unl essthe PHAiseligibletocompleteastreamlinedsubmissiondueto highperformerstatus. <b>HighperformingPHAs</b> mayskipto component12.)
2.ProgramDescription	1:
a.SizeofProgram  Yes No:	WillthePHAlimitt henumberoffamiliesparticipatinginthe section8homeownershipoption?
numberofpart	thequestionabovewasyes, which statement best describes the icipants ?(selectone) werparticipants participants 00 participants nan 100 participants
it; cı	ligibilitycriteria nePHA'sprogramhaveeligibilitycriteriaforparticipat ionin sSection8HomeownershipOptionprograminadditiontoHUD riteria? yes,listcriteriabelow:

# 12. PHACommunityServiceandSelf -sufficiencyPrograms

[24CFRPart903.79(1)]

ExemptionsfromComponent12:Highperformingandsma llPHAsarenotrequiredtocompletethis component.Section8 -OnlyPHAsarenotrequiredtocompletesub -componentC.

#### NotRequired -HighPerformer

#### A. PHAC oor dination with the Welfare (TANF) Agency

1.Cooperativeage			
∐Yes ∐No:H	HasthePHAhasenteredintoacooperativeag TANFAgency,toshareinformationand services(ascontemplatedbysection120 of1937)?	d/ortargetsuppor	tive
	Ifyes, what was the date that agree em	entwassigned?	DD/MM/YY
	tioneffortsbetweenthePHAandTANFage	ency(selectalltha	t
apply)  Clientrefe	Parrale		
=	ionsharingregardingmutualclients(forren	ntdeterminations	and
Coordina	atetheprovisionofspecificsocialandself stoeligiblefamilies	-sufficiencyse	rvicesand
	lministerprograms		
Jointlyad Partnerto Jointadm	oadministeraHUDWelfare -to-Workvo	oucherprogram	
_	ninistrationofotherdemonstrationprogram	1	
U Other(des	scribe)		
B. Servicesand	dprogramsofferedtoresidentsandpartic	cipants	
(1)Gener	<u>ral</u>		
a.Self -S	SufficiencyPolicies		
Which,ifa enhanceth following Pt	Fanyofthefollowing discretionary policy in a contract of the c	cieswillthePHAe ofassistedfamili	
Se Se P1	Section8admissionspolicies Preferenceinadmissiontosection8forcertai Preferencesforfamiliesworkingorengaging Programsfornon -housingprogramsoperat	gintrainingoredu	cation
P1	PHA Preference/eligibilityforpublichousinghon participation	neownershipopt	ion

Preference/eligibilityforsection8homeownershipoptionparticipation Otherpolicies(listbelow)				
b.EconomicandSocials	self -suffi	ciencyprograms		
pro su: tab Su	ogramstoenl fficiencyofr ble;if"no"sk	iptosub -compo ograms.Thepositi		ing
	Serv	icesandProgram	ıs	
ProgramName&Description (includinglocation,ifappropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (developmentoffice/ PHAmainoffice/ otherprovidername)	Eligibility (publichousingor section8 participantsor both)
(2)FamilySelfSufficiencypro	gram/s			
Fam	•	ency(FSS)Participa		
Program	RequiredNumberofParticipants (startofFY2000Estimate) ActualNumberofParticipants (Asof:DD/MM/ YY)		-	
PublicHousing				
Section8				
<u> </u>		ntainingtheminim	umprogramsize	

theminimum

the steps the PHA plans to take to achieve at least

programsize?

#### Ifno,liststepsthePHAwilltakebelow:

#### **C.WelfareBenefitReductions**

# 13.PHASafetyandCrimePreventionMeasures

[24CFRPart903.79(m)]

 $\label{lem:example_example} Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and the property of the$ Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are a support of the property of the prope

#### NotRequired -HighPerformer

A.Needformeasurestoensurethes afetyofpublichousingresidents
1.Describetheneedformeasurestoensurethesafetyofpublichousingresidents (selectallthatapply)  Highincidenceofviolentand/ordrug -relatedcrimeinsomeorallofthePHA's developments  Highincidenceofviolentand/ordrug -relatedcrimeintheareassurroundingor adjacenttothePHA'sdevelopments  Residentsfearfulfortheirsafetyand/orthesafetyoftheirchildren Observedlower -levelcrime,vandalismand/orgraffiti Peopleonwaitinglistunwillingtomoveintooneormoredevelopmentsdueto perceivedand/oractuallevelsofviolentand/ordrug -relatedcrime Other(describebelow)
2. Whatin formationordatadidthe PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).
Safetyandsecuritysurveyofresidents Analysisofcrimestatisticsovertimeforcrimes committed"inandaround" publichousingauthority Analysisofcosttrendsovertimeforrepairofvandalismandremovalof graffiti Residentreports PHAemployeereports Policereport s Demonstrable,quantifiablesuccesswithpreviousorongoinganticrime/antidrugprograms Other(describebelow)
2. Whichdevelopmentsaremostaffected?(listbelow)
B.CrimeandDrugPreventionactivitiesthePHAh asundertakenorplansto undertakeinthenextPHAfiscalyear  1.ListthecrimepreventionactivitiesthePHAhasundertakenorplanstoundertake:
(selectallthatapply)

Contractingwithoutsideand/orresidentorganizationsforthe provision of crime-and/ordrug -preventionactivities CrimePreventionThroughEnvironmentalDesign Activitiestargetedtoat -riskyouth,adults,orseniors VolunteerResidentPatrol/BlockWatchersPro gram Other(describebelow)
2. Whichdevelopments are most affected? (list below)
C.CoordinationbetweenPHA and the police
1.DescribethecoordinationbetweenthePHAandtheappropriatepoliceprecinctsfor carryingoutcrime preventionmeasuresandactivities:(selectallthatapply)
Policeinvolvementindevelopment,implementation,and/orongoing evaluationofdrug -eliminationplan  Policeprovidecrimedatatohousingauthoritystafffor analysisandaction Policehaveestablishedaphysicalpresenceonhousingauthorityproperty(e.g., communitypolicingoffice,officerinresidence) Policeregularlytestifyinandotherwisesupportevictioncases PoliceregularlymeetwiththePHAmanagementandresidents AgreementbetweenPHAandlocallawenforcementagencyforprovisionof above-baselinelawenforcementservices Otheractivities(listbelow)
2. Whichdevelopmentsaremostaffected?(listbelow)
<b>D.AdditionalinformationasrequiredbyPHDEP/PHDEPPlan</b> PHAseligibleforFY2000PHDEPfundsmustprovideaPHDEPPlanmeetingspecifiedrequirements priortoreceiptofPHDEPfunds.
<ul> <li>Yes</li></ul>
14.PETPOLICY [24CFRPart903.79(n)]
[2101 IC m(200.17(n)]

#### I. PREAMBLE

HUD regulations provide for the ownership of pets in federally assisted rental housing built exclusively f or occupancy by low income families and individuals. The following pet policy is intended to meet the needs of management, non-petowning tenants and petowning tenants.

This policy does not apply to animals that are used to assist persons with disabilities. Assistive animals are allowed in all public housing facilities with no restrictions other than those imposed on all tenants to maintain their units and associated facilities in a decent, safe and sanitary manner and to refrain from disturbing their neighbors.

#### II. DEFINITIONOFPET

Petsaredefinedas:

- A. Domesticated short haired dogs no exceeding 25 pounds in weight fully grownandmeetingotherrequirements of this policy.
- B. Domesticateddeclawedcatsnoexceeding13poundsinweightfullygrown andmeet ingotherrequirementsofthispolicy.
- C. Fishinapprovedtanknotexceeding20gallonsofwater.
- D. Domesticated, caged, small birds in approved cages.
- E. Nootherlivingcreatureshallbeconsideredapet.

#### III. <u>PETAPPLICATIONREGISTRATION</u>

Tenants who wish to apply for a Pet Permit must file an application for a Pet Policy with the Program Administrator. Applications will be processed on a first served basis.

#### IV. PETPERMIT

Prior to placing a pet into residency in any Housing Authority administered housing, applicant tenant must file an application for a Pet Permit. A Pet Permitwillbeissuedafterallinitialconditionofthispolicyhavebeenmet.

#### V. <u>CONDITIONFORINSURAN</u>CEOFPETPERMIT

A. Applicant must file a Certificate of Insurance with the Program Administrator certifying that applicant has renter's insurance with liability and property damage coverage in the amount of \$10,000.00.

# 15.CivilRightsCertifications

[24CFRPart903.79(o)] Civil right scertifications are included in the PHAP lan Certifications of the property of t**fCompliance** with the PHAP lans and Related Regulations.

16.FiscalAudit
[24CFRPart903.79(p)]

1. $\square$ Yes	No:IsthePHArequiredtohaveanauditconductedundersection				
	5(h)(2)oftheU.S.HousingActof1937(42US.C.1437c(h))?				
	(Ifno,skiptocomponent17.)				
$2. \boxtimes Yes$	No:WasthemostrecentfiscalauditsubmittedtoHUD?				
3. <b>Yes</b>	No:Werethe reanyfindingsastheresultofthataudit?				
4. Yes	No: Iftherewereanyfindings,doanyremainunresolved?				
	Ifyes,howmanyunresolvedfindingsremain?				
5. <b>Yes</b>	No: Haveres ponsestoanyunresolvedfindingsbeensubmittedto				
	HUD?				
	Ifnot, when are they due (state below)?				

17.PHAAssetManagement
[24CFRPart903.79(q)]

#### NotRequired -HighPerformer

1. Yes No:Istl	hePHAengaginginanyacti long-termas setmanagen includinghowtheAgency capitalinvestment,rehabi andotherneedsthathave PHAPlan?	nentofitspublichou willplanforlong llitation,moderniza	singstock, -termoperating, tion,disposition,
apply)  Notapplicable Privatemanag Development Comprehensi	gement s-basedaccounting vestockassessment	illthePHAundertak	ce?(selectallthat
Other:(listbel  3. Yes No:Ha	ow) sthePHAincludeddescript inth <b>wptional</b> PublicHo	U	

### 18.OtherInformation

[24CFRPart903.79 (r)]

## A.ResidentAdvisoryBoardRecommendations 1. Yes No:DidthePHAreceiveanycommentsonthePHAPlanfromthe ResidentAdvisoryBoard/s? 2. If yes, the comments are: (if comments were received, the PHA **MUST**selectone) AttachedatAttachment(D) Providedbelow: 3.InwhatmannerdidthePHAaddressthosecomments?(selectallthatapply) Considered comments, but determined that no changestothePHAPlanwere necessary. $\boxtimes$ ThePHAchangedportionsofthePHAPlaninresponsetocomments Listchangesbelow: madepetpolicymorerestrictive Other:(listbelow) orResidentsonthePHABoard **B.DescriptionofElectionprocessf** 1. $\square$ Yes $\square$ No: DoesthePHAmeettheexemptioncriteriaprovidedsection 2(b)(2)oftheU.S.HousingActof1937?(Ifno,continueto question2;ifyes,skiptosub -componentC.) 2. $\square$ Yes $\square$ No: WastheresidentwhoservesonthePHABoardelectedbythe residents?(Ifyes,continuetoquestion3;ifno,skiptosub componentC.) 3.DescriptionofResidentElectionProcess a. Nomination of candidates for place on the ballot: (select all that apply) Candidateswerenominatedbyresidentandassistedfamilyorganizations CandidatescouldbenominatedbyanyadultrecipientofPHAassistance Self-nomination:CandidatesregisteredwiththePHAandrequestedaplaceon ballot Other:(describe) b.Eligiblecandidates:(selectone) AnyrecipientofPHAassistance AnyheadofhouseholdreceivingPHAa ssistance AnyadultrecipientofPHAassistance Anyadultmemberofaresidentorassistedfamilyorganization Other(list)

<ul> <li>c.Eligiblevoters:(selectallthatapply)</li> <li>Alladultrec ipientsofPHAassistance(publichousingandsection8tenant basedassistance)</li> <li>RepresentativesofallPHAresidentandassistedfamilyorganizations</li> <li>Other(list)</li> </ul>
C.StatementofConsistencywiththeConsolidatedPla n
ForeachapplicableConsolidatedPlan,makethefollowingstatement(copyquestionsasmanytimesas necessary).
1. Consolidated Planjuris diction: (Monmouth County)
2. The PHA has taken the following steps to ensure consistency of this PHAP lanwith the Consolidated Plan for the jurisdiction: (select all that apply)
ThePHAhasbaseditsstatementofneedsoffamiliesinthejurisdictiononthe needsexpressedintheConsolidatedPlan/s.
ThePHAhasparticipatedi nanyconsultationprocessorganizedandofferedby theConsolidatedPlanagencyinthedevelopmentoftheConsolidatedPlan.
ThePHAhasconsultedwiththeConsolidatedPlanagencyduringthe developmentofthisPHAPlan.
Activities to be undertaken by the PHA in the coming year are consistent with the initiative scontained in the Consolidated Plan. (list below)  Provide low - income housing.
Other:(listbelow)
4.TheConsolidatedPlanofthejurisdic tionsupportsthePHAPlanwiththefollowing actionsandcommitments:(describebelow)
D.OtherInformationRequiredbyHUD
Usethissectiontoprovideanyadditionalinformationrequested by HUD.
Ourdefinition of "substantial deviation" and "sign if icantamendment or modification" are defined as discretionary changes in the plans or policies of the housing authority that fundamentally change the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Com missioners.
<u>Attachments</u>

- A. DeconcentrationPolicy
- B. CapitalFundProgramAnnualStatement
- C. CapitalFundProgram5YearActionPlan
- D. ResidentComments
- E. Income, Exclusion from Income, and Deductions from Income
- F. ImplementationofPublicHousingResidentCommunityService Requirement
- G. StatementofProgressofAgencyPlanGoals
- H. ResidentMembershipofthePHAGoverningBoard
- I. MembershipoftheResident AdvisoryBoard
- J. REACFollowUpPlan
- K. P/EReport(2000CFP) -03/31/2002
- L. P/EReport(2001CFP) -03/31/2002

# Attachment A.

Thispolicyhasnotbeenputintoeffectbecausenoneofourcovered developmentshaveaverageincomesaboveorbelow85% to115%of theaverageincomesofallsuchdevelopments.

#### **DECONCENTRATIONPOLICY**

It is Housing Authority's policy to provide for deconcentration of poverty and encourage income. Toward this end, we will skip families on the waiting list to reach other families with a lower or higher income. We will accomplish this in a uniform andnon -discriminatingmanner.

The Housing Authority will affirmatively market our housing to all eligible income groups. Lower income residents will not be steered toward lower income developments and higher income people will not be steered toward higher income developments.

Priortothebeginningofeachfiscalvear, wewillanalyzetheincomelevelsoffamilies residing in family development, the income levels of census trac ts in which our developmentislocated, and the income levels of the families on the waiting list. Based on this analysis, we will determine the level of marketing strategies and deconcentrationincentivestoimplement.

#### **DeconcentrationIncentives**

The Ho using Authority may offer one or more incentives to encourage applicant families whose income classification would help to meet the deconcentration goals ofaparticulardevelopment.

Various incentives may be used at different times, or under different c onditions. butwillalwaysbeprovidedinaconsistentandnondiscriminatorymanner.Referto Housing Authority's Administration and Continued Occupancy Policies regarding incentivetransfers.

#### SelectionFromtheWaitingList

The Housing Authority shall follow the statutory requirement that at least 40% of newlyadmittedfamiliesinanyfiscalyearbefamilieswhoseannualincomeisator below 30% of the area median income. To insure this requirement is met we shall quarterly monitor the incomes of newly admitted families and the incomes of the families on the waiting list. If it appears that the requirement to house extremely low-income families will not be met, we will skip higher income families on the waitinglisttoreachextremelylow -incomefamilie s.

If there are not enough extremely low -income families on the waiting list we will conduct outreach on a non -discriminatory basis to attract extremely low -income families to reach the statutory requirement.

#### IncentiveTransfers

Transfer requests will be encouraged and approved for families who live in a development where their income category (below or above 30% of area median) predominates and wish to move to a development where their income category doesnot predominate.

Families living in multifami ly developments have the opportunity to transfer to scattered-sitehousing. Families approved for such transfers will meet the following eligibility criteria:

- A. Havebeenatenantforthreeyears;
- B. For a minimum of one year, at least one adult family member is enrolled in an economic self-sufficiency program or is working at least thirty -five (35) hours per week, the adult family members are 62 years of age or older or are disabled or are the primary caregivers to others with disabilities;
- C. Adultm embers who are required to perform community service have been current in these responsibilities since the inception of the requirement of one year which ever is less;
- D. The family is current in the payment of all charges owed the Housing Authoritya ndhasnotpaidlaterentforatleastoneyear;
- E. Thefamilypassesacurrenthousekeepinginspectionanddoesnothaveany recordofhousekeepingproblemsduringthelastyear;
- F. The family has not materially violated the lease over the past two year sby disturbing the peaceful enjoyment of their neighbors, by engaging in criminal or drug -related activity, or by threatening the health or safety of tenants or Housing Authority staff.
- G. Participates in a series of classes conducted by the Housing Auth ority on basichomeandyardcare.

The Housing Authority's policy on processing transfers is covered in its AdmissionsandOccupancypolicies.

# Attachment B.

# CAPITALFUNDPROGRAM(2002)

Ann	ualStatement/PerformanceandEvaluati	ionReport							
Capi	talFundPr ogramandCapitalFundPro	gramReplaceme	entHousingFacto	or(CFP/CFPRHF	)				
PartI:Summary									
PHANa	ame:	GrantTypeandNumber				Federal			
Nepti	uneHousingAuthority	CapitalFundProgramGr	antNo: <b>NJ39P048-5</b>	501-02		FYof			
		ReplacementHousingFac	et orGrantNo: <b>N/A</b>			Grant:			
						2002			
Ori	ginalAnnualStatement ReserveforDisasters/Emerg	encies RevisedAn	nualStatement(revision	nno: )		1			
Per	formanceandEvaluationReportforPeriodEnding:	FinalPerforma	nceandEvaluationRep	ort					
Line	SummarybyDevelopmentAccount	TotalEstin	natedCost	TotalAct	ualCost				
No.									
		Original	Revised	Obligated	Exper	ıded			
1	Totalnon -CFPFunds	0							
2	1406Operations	0							
3	1408ManagementImprovementsSoftCosts	20,000							
	ManagementImprovementsHardCosts	0							
4	1410Administration	36,000							
5	1411Audit	0							
6	1415LiquidatedDamages 0								
7	1430FeesandCosts	68,000							
8	1440SiteAcquisition	0							
9	1450SiteImprovement	0							
10	1460DwellingStructures	412,818							
11	1465.1DwellingEquipment —Nonexpendable	30,000							

Ann	ualStatement/PerformanceandEvaluati	ionReport				
Capi	talFundPr ogramandCapitalFundPro	gramReplacem	entHousingFacto	or(CFP/CFPRHF)		
Part	I:Summary	_	C			
PHAN	ame:	GrantTypeandNumbe	r		Federal	
Nepti	ıneHousingAuthority	CapitalFundProgramG	rantNo: <b>NJ39P048-5</b>	01-02	FYof	
		ReplacementHousingFa	ct orGrantNo: <b>N/A</b>		Grant:	
					2002	
Ori	ginalAnnualStatement ReserveforDisasters/Emerg	encies RevisedAr	nualStatement(revision	nno:	2002	
	formanceandEvaluationReportforPeriodEnding:		nceandEvaluationRep	*		
Line	SummarybyDevelopmentAccount	TotalEsti	matedCost	TotalActualCost		
No.						
12	1470NondwellingStructures	0				
13	1475NondwellingEquipment	16,000				
14	1485Demolition	0				
15	1490ReplacementReserve	0				
16	1492MovingtoWorkDemonstration	0				
17	1495.1RelocationCosts	0				
18	1499DevelopmentActivities	0				
19	1502Contingency	0				
	AmountofAnnualGrant:(sumoflines)	582,818				
	Amountofli neXXRelatedtoLBPActivities	0				
	AmountoflineXXRelatedtoSection504compliance	0				
	AmountoflineXXRelatedtoSecurity –SoftCosts	0				
	AmountofLineXXrelatedtoSecurityHardCosts	0				
	AmountoflineXXRelatedtoEnergyConserv ation					
	Measures	0				
	CollateralizationExpensesorDebtService	0				

# $Annual Statement/Performance and Evaluation Report \\ Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) \\ Part II: Supporting Pages$

PHAName:		GrantTypeandNu	FederalFYofGrant:					
Nepti	ıneHousingAuthority	CapitalFundProgramGrantNo: NJ39P048-501-02				2002		
	•	ReplacementHousingFactorGrantNo: N/A						
Development Number			Quantity	TotalEstimatedCost		TotalActualCost		Statusof Work
Name/HA-Wide Activities				OriginalRevised	Revised Obligate		ObligatedExpended	
HAWide	ManagementImprovement	1408		20,000		Jongarean		
HAWide	AdministrativeFees	1410		36,000				
HAWide	A/EFees	1430.1		25,000				
HAWide	ConsultantFees	1430.2		43,000				
HAWide	Appliances	1465.1		30,000				
HAWide	OfficeEquipment	1475.1		8,000				
HAWide	MaintenanceEquipme nt	1475.2		8,000				
			Subtotal	170,000				
HAWide	KitchenUpgrade	1460	198Units	412,818				
			Subtotal	412,818				
			Total	582,818				

#### AnnualStatement /PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartIII:ImplementationSchedule PHAName: GrantTypeandNumber FederalFYofGrant: CapitalFundProgramNo: NJ39P048-501-02 NeptuneHousingAuthority 2002 ReplacementHousingFactorNo: N/A DevelopmentNumber AllFundObligated AllFundsExpended ReasonsforRev isedTargetDates Name/HA-Wide (QuarterEndingDate) (QuarterEndingDate) Activities Original Revised Original Actual Revised Actual 09/30/05 HAWide 03/31/04 NJ48-1 03/31/04 09/30/05 NJ48-2 03/31/04 09/30/05 NJ48-3 03/31/04 09/30/05 NJ48-4 03/31/04 09/30/05 NJ48-5 03/31/04 09/30/05 03/31/04 NJ48-6 09/30/05

# Attachment C.

# ${\bf Capital Fund Program Five \ - Year Action Plan}$

PartI:Summary

PHAName						Origin	al5 -YearPlan		
NeptuneHousingAuthority						Revisi			
Development Year1		WorkSta	atementforYear2	WorkStatementforYear3		WorkStatementforYear4		WorkStatementforYear5	
Number/Name/HA-		FFYGrant: NJ39P048-501-03 FFYGrant: NJ39P048-501-04		NJ39P048-501-04	FFYGrant: <b>NJ39P048-501-05</b>		FFYGrant: <b>NJ39P048-501-06</b>		
Wide		PHAFY:	2003	PHAFY:	2004	PHAFY:	2005	PHAFY:	2006
NJ48-1			147,000		0		0		50,000
NJ48-2	Annual		45,000		100,000		0		0
NJ48-3	Statement		120,000		100,000		0		150,000
NJ48-4			0		0		0		0
NJ48-5			75,000		0		0		50,000
NJ48-6			25,818		0		412,818		162,818
HAWide			0		212,818		0		0
Subtotal			412,818		412,818		412,818		412,818
1408			20,000		20,000		20,000		20,000
1410			36,000		36,000		36,000		36,000
1430			68,000		68,000		68,000		68,000
1465			30,000		30,000		30,000		30,000
1475			16,000		16,000		16,000		16,000
Subtotal			170,000		170,000		170,000		170,000
TotalCFPFunds			582,818		582,818		582,818		582,818
(Est.)									
TotalReplacement									
HousingFactorFunds									
			<u> </u>		·		·		

CapitalFundProgramFive -YearActionPlan

Activitiesfor Year1 2002		ActivitiesforYear: 200 FFYGrant: NJ39P048-501 PHAFY: 2003		ActivitiesforYear: <u>2004</u> FFYGrant: <b>NJ39P048-501-04</b> PHAFY: <b>2004</b>				
	NJ48-1	StormDoors(60+4)	32,000	HAWide	SiteIm provement	212,818		
	NJ48-1	Gutters&Leaders	65,000	NJ48-2	GarbageEnclosure(4)	100,000		
	NJ48-1	BalconyUpgrade	50,000	NJ48-3	MaintenanceShop	100,000		
	NJ48-2	Gutters&Leaders	45,000					
	NJ48-3	StormDoors(60+60)	50,000					
	NJ48-3	Gutters&Leaders	70,000					
	NJ48-5	StormDoors(45+45)	45,000					
	NJ48-5	Playground	30,000					
	NJ48-6	Playground	25,818					
		Tota	412,818		Total	412,818		

CapitalFundProgramFive -YearActionPlan PartII:Supp ortingPages —WorkActivities

Activities for Year 1 2002		ActivitiesforYear: 2005 FFYGrant: NJ39P048-501-0 PHAFY: 2005	)5	ActivitiesforYear: 2006 FFYGrant: NJ39P048-501-06 PHAFY: 2006			
	NJ48-6	VinylSiding	412,818	NJ48-1	SecurityCameras	50,000	
				NJ48-3	SecurityCameras	150,000	
				NJ48-5	SecurityCameras	50,000	
				NJ48-6	BathroomUpgrade(58Units)	162,818	
		Total	412,818		Total	412,818	

#### Attachment D.

#### RESIDENTCOMMENTS

The Authority received two comments during the public comment period. They were:

• Residents were very concerned about the elimination of the PHDEP grant. They fearedareturnof "drugproblemsliketheolddays".

The Housing Authority resp onded that this was a federal program eliminated due to priority changes. Residents were encouraged to keep contact with the police, and they should write to congress to protest the elimination of funds.

• Residents expressed great satisfaction with the pro posed capital fund program. Theywerehappytoseethatunitupgradesweretakingplace.

The Housing Authority responded that all known emergency work has been completed. The priority is now on the units. Continued resident input is encouraged.

#### Attachment E.

# INCOME, EXCLUSIONSF ROMINCOME, AND DEDUCTIONSFROMINCO ME

#### (FROMADMISSIONAND CONTINUEDOCCUPANCY POLICY, SECTION11.0)

# 11.0 Income, Exclusions From Income, and Deductions From Income

Todetermine annual income, the Housin gAuthority counts the income of all family members, excluding the types and sources of income that are specifically excluded. Once the annual income is determined, the Housing Authority subtracts all allowable deductions (allowances) to determine the TotalTenantPayment.

#### 11.1 Income

Annualincomemeansallamounts, monetary or not, that:

- A. Goto(oron behalf of) the family head or spouse (even if temporarily absent) orto any other family member; or
- B. Are anticipated to be received from as our ceoutside the family during the 12-month period following admission or annual reexamination effective date; and
- C. Arenotspecifically excluded from annual income.

Annualincomeincludes, but is not limited to:

- A. The full amount, before any payro lldeductions, of wages and salaries, overtime pay, commissions, fees, tips and bonuses, and other compensation for personal services.
- B. The net income from the operation of a business or profession.

  Expenditures for business expansion or amortization o f capital indebtedness are not used as deductions in determining net income. An allowance for depreciation of assets used in a business or profession may be deducted, based on straight -line depreciation, as provided in Internal Revenue Service regulations. Any withdrawal of cashor assets

from the operation of a business or profession is included in income, except to the extent the withdrawalisare imbursement of cashor assets invested in the operation by the family.

- C. Interest, dividends, and other net income of any kind from real or personal property. Expenditures for amortization of capital indebtedness are not used as deductions in determining net income. An allowance for depreciation of assets used in a business or profession may be deducted, based on straight -line depreciation, as provided in Internal Revenue Service regulations. Any withdrawal of cashor assets from an investment is included in income, except to the extent the withdrawal is reimbursement of cash or assets invested by the family. Where the family has net family assets in excess of \$5,000, annual income includes the greater of the actual income derived from all net family assets or a percentage of the value of such assets based on the current passbooks aving srate, as determined by HU D.
- D. The full amount of periodic amounts received from Social Security, annuities, insurance policies, retirement funds, pensions, disability or death benefits, and other similar types of periodic receipts, including a lump-sumamount or prospective mon thly amounts for the delayed start of a periodic amount. (However, deferred periodic amounts from supplemental security income and Social Security benefits that are received in a lump sumamount or in prospective monthly amounts are excluded.)
- E. Payments in lieu of earnings, such as unemployment and disability compensation, worker's compensation, and severance pay. (However, lump sum additions such as insurance payments from worker's compensationareexcluded.)
- F. Welfareassistance.
  - 1. If the welfar e assistance payment includes an amount specifically designated for shelter and utilities that is subject to adjustment by the welfare assistance agency in accordance with the actual cost of shelter and utilities, the amount of welfare assistance incometo be included as income consists of:
    - a. The amount of the allowance or grant exclusive of the amount specifically designated for shelter or utilities; plus
    - b. Themaximumamountthatthewelfareassistanceagency couldinfactallowthefamilyforshel terandutilities. If

the family's welfare assistance is ratably reduced from the standard of need by applying a percentage, the amount calculated under this requirement is the amount resulting from one application of the percentage.

- 2. If the amount of welfare is reduced due to an act of fraud by a family member or because of any family member's failure to comply with requirements to participate in an economic self sufficiency program or work activity, the amount of rent required to be paid by the family will not be decreased. In such cases, the amount of income attributable to the family will include what the family would have received had they complied with the welfare requirements and/or had not committed an act of fraud.
- 3. If the amount of welfare assistance is reduced as a result of a lifetime limit, the reduced amount is the amount that shall becounted as income.
- G. Periodic and determinable allowances, such as alimony, child support payments, and regular contributions or gifts received f rom organizations or granizations or granizati
- H. Allregularpay, special pay, and allowances of a member of the Armed Forces. (Special pay to a member exposed to host ile fire is excluded.)

#### 11.2 Annualincome

Annualincomedoesnot includethefollowing:

- A. Income from employment of children (including foster children) under the age of 18 years;
- B. Payments received for the care of foster children or foster adults (usually persons with disabilities, unrelated to the tenant family, who areunabletolivealone);
- C. Lump-sum additions to family assets, such as inheritances, insurance payments (including payments underhealth and accident insurance and worker's compensation), capital gains, and settlement for personal or propertylos ses;
- D. Amounts received by the family that are specifically for, or in reimbursementof,thecostofmedicalexpensesforanyfamilymember;

- E. Incomeofalive -inaide;
- F. The full amount of student financial assistance paid directly to the studentor totheeducationalinstitution;
- G. ThespecialpaytoafamilymemberservingintheArmedForceswhois exposedtohostilefire;
- H. Theamountsreceivedfromthefollowingprograms:
  - 1. AmountsreceivedundertrainingprogramsfundedbyHUD;
  - 2. Amounts received by a person with a disability that are disregarded for a limited time for purposes of Supplemental Security Income eligibility and benefits because they are set asideforuseunderaPlantoAttainSelf -Sufficiency(PASS);
  - 3. Amounts received by a participant in other publicly assisted programs that are specifically for or in reimbursement of out-of-pocket expenses incurred (special equipment, clothing, transportation, childcare, etc.) and that are made solely to allow participation in aspecific program;
  - 4. Amounts received under a resident service stipend. A resident service stipend is a modest amount (not to exceed \$200 per month) received by a resident for performing a service for the Housing Authority or owner, on a part time basis, that en hances the quality of life in the development. Such services may include, but are not limited to, fire patrol, hall monitoring, lawn maintenance, and resident initiatives coordination. No resident may receive more than one such stipend during the same peri od of time;
  - 5. Incremental earnings and benefits resulting to any family member from participation in qualifying State or local employmenttrainingprograms(includingtrainingprogramsnot affiliated with a local government) and training of a family membr as resident management staff. Amounts excluded by this provision must be received under employment training programs with clearly defined goals and objectives and are excluded only for the period during which the family member participates in the employ menttraining program;
  - 6. Temporary,nonrecurringorsporadicincome(includinggifts);

- 7. Reparation payments paid by a foreign government pursuant to claims filed under the laws of that government by persons who were persecuted during the Naziera;
- 8. Earnings in excess of \$480 for each full -time student 18 years oldorolder(excludingtheheadofhouseholdandspouse);
- 9. Adoption assistance payments in excess of \$480 per adopted child:
- 10. For family members who enrolled in certain training progra ms prior to 10/1/99, the earnings and benefits resulting from the participation if the program provides employment training and supportive services in accordance with the Family Support Act of 1988, Section 22 of the 1937 Act (42 U.S.C. 1437t), or any comparable Federal, State, or local law during the exclusion period. For purposes of this exclusion the following definitions apply:
  - a. ComparableFederal,Stateorlocallawmeansaprogram providing employment training and supportive services that:
    - i. Is authorizedbyaFederal,Stateorlocallaw;
    - ii. Is funded by the Federal, State or local government;
    - iii. Is operated or administered by a public agency; and
    - iv. Has as its objective to assist participants in acquiringemploymentskills.
  - b. Exclusion period means the period during which the family member participates in a program described in this section, plus 18 months from the date the family member begins the first job acquired by the family member after completion of such program that is not fundedbypublichousing assistance under the 1937 Act. If the family member is terminated from employment with goodcause, the exclusion periods hallend.
  - c. Earnings and benefits means the incremental earnings and benefits resulting from a qualifying emplo yment trainingprogramorsubsequentjob.
- 11. The incremental earnings due to employment during the 12

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month period following date of hire shall be excluded. This exclusion (paragraph 11) will not apply for any family who concurrently is eligible for exclusion #10. Additionally, this exclusionisonlyavailabletothefollowing families:

- a. Families whose income increases as a result of employment of a family member who was previously unemployed for one or more years.
- b. Families whose income increases d uring the participation of a family member in any family self sufficiencyprogram.
- c. Families who are or were, within 6 months, assisted underaStateTANFprogram.

(While HUD regulations allow for the housing authority to offer an escrow account in lie u of having a portion of their income excluded under this paragraph, it is the policy of this housing authority to provide the exclusion in all cases.)

- 12. Deferred periodic amounts from supplemental security income and Social Security benefits that are received in a lump sum amountorinprospectivemonthlyamounts;
- 13. Amounts received by the family in the form of refunds or rebates under State or local law for property taxes paid on the dwellingunit;
- 14. AmountspaidbyaStateagencytoafamilywit hamemberwho hasadevelopmentaldisabilityandislivingathometooffsetthe cost of services and equipment needed to keep the developmentallydisabledfamilymemberathome;or
- 15. Amountsspecifically excluded by any other Federal statute from consideration as income for purposes of determining eligibility or benefits. These exclusions include:
  - a. The value of the all otment of foodstamps
  - b. Payments to volunteers under the Domestic Volunteer ServicesActof1973
  - c. Payments received under the Alaska Native Claims SettlementAct

- d. Income from submarginal land of the U.S. that is held in trust for certain Indian tribes
- e. Payments made under HHS's Low -Income Energy AssistanceProgram
- f. Payments received under the Job Training Partnership Act
- g. Income from the disposition of funds of the Grand River Band of Ottawa Indians
- h. Thefirst\$2000percapitareceivedfromjudgmentfunds awardedforcertainIndianclaims
- i. Amount of scholarships awarded under Title IV includingWorkStudy
- j. Pyments received under the Older Americans Act of 1965
- k. PaymentsfromAgentOrangeSettlement
- 1. PaymentsreceivedundertheMaineIndianClaimsAct
- m. The value of child care under the Child Care and DevelopmentBlockGrantActof1990
- n. Earnedincometaxcreditrefundpayments
- o. Payments for living expenses under the Americorps Program
- p. Additional income exclusions provided by and funded bytheHousingAuthority

The Housing Authority will not provide exclusions from income in addition to those already provided for by HUD.

#### 11.3 Deductionsfromannualincome

The following deductions will be made from annual income:

A. \$480foreachdependent;

- B. \$400foranyelderlyfamilyordisabledfamily;
- C. For any family that is not an elderly o r disabled family but has a member (other than the head or spouse) who is a person with a disability, disability assistance expenses in excess of 3% of annual income. This allowance may not exceed the employment income receivedbyfamilymemberswhoare 18 yearsofageorolderasaresult oftheassistancetothepersonwithdisabilities.
- D. Foranyelderlyordisabledfamily:
  - 1. That has no disability assistance expenses, an allowance for medical expenses equal to the amount by which the medical expensesexceed3% of annual income;
  - 2. That has disability expenses greater than or equal to 3% of annual income, an allowance for disability assistance expenses computed in accordance with paragraph C, plus an allowance formedical expenses that equal the family smedical expenses;
  - 3. That has disability assistance expenses that are less than 3% of annual income, an allowance for combined disability assistance expenses and medical expenses that is equal to the total of these expenses less 3% of annual income.
- E. Childcareexpenses.

#### Attachment F.

#### IMPLEMENTATIONOFPU BLICHOUSINGRESIDEN T COMMUNITYSERVICERE QUIREMENTS

#### 1.1 General

Inordertobeeligibleforcontinuedoccupancy,eachadultfamilymembermust either(1)contributeeight hourspermonthofcommunityservice(notincluding political activities) within the community in which the public housing development is located, or (2) participate in an economic self -sufficiency programunlesstheyareexemptfromthisrequirement

#### 1.2 Exemptions

The following adult family members of tenant families are exempt from this requirement.

- A. Familymemberswhoare62orolder
- B. Familymemberswhoareblindordisabled
- C. Family members who are the primary care giver for someone who is blindordisabled
- D. Familymembersengagedinworkactivity
- E. Familymembers who are exempt from work activity under part A title IV of the Social Security Actor under any other State welfare program, including the welfare -to-work program
- F. Family me mbers receiving assistance under a State program funded underpartAtitleIVoftheSocialSecurityActorunderanyotherState welfareprogram,includingwelfare -to-workandwhoareincompliance withthatprogram

#### 1.3 Notification of the Requirement

The Housing Authority shall identify all adult family members who are apparentlynotexemptfromthecommunityservicerequirement.

The Housing Authority shall notify all such family members of the community service requirement and of the categories of ind ividuals who are exempt from the requirement. The notification will provide the opportunity for family members to claim and explain an exempt status. The Housing Authority shall verify such claims.

The notification will advise families that their communit y service obligation willbeginupontheeffectivedateoftheir first annual reexamination on or after 10/1/99. For family's paying a flat rent, the obligation begins on the date their annual reexamination would have been effective had an annual reexamina tion taken place. It will also advise them that failure to comply with the community service requirement will result in ineligibility for continued occupancy at the time of any subsequent annual reexamination.

#### 1.4 VolunteerOpportunities

Community servi ce includes performing work or duties in the public benefit that serve to improve the quality of life and/or enhance resident self sufficiency, and/or increase the self -responsibility of the resident within the community.

An economic self sufficiency pr ogram is one that is designed to encourage, assist, train or facilitate the economic independence of participants and their families or to provide work for participants. These programs may include programs for job training, work placement, basic skills tra ining, education, English proficiency, work fare, financial or household management, apprenticeship, and any programnecessary to ready aparticipant towork (such as substance abuse or mental health treatment).

The Housing Authority will coordinate with social service agencies, local schools, and the Human Resources Office in identifying a list of volunteer communityservice positions.

Togetherwiththeresidentadvisorycouncils, the Housing Authoritymay create volunteer positions such as hall monitor ing, litter patrols, and supervising and recordkeeping for volunteers.

#### 1.5 TheProcess

AtthefirstannualreexaminationonorafterOctober 1, 1999, and each annual reexamination thereafter, the Housing Authority will do the following:

- A. Provideal istofvolunteeropportunitiestothefamilymembers.
- B. Provideinformationaboutobtainingsuitablevolunteerpositions.

- C. Provide a volunteer time sheet to the family member. Instructions for the time sheet require the individual to complete the form and have a supervisordate and sign for each period of work.
- D. Assign family members to a volunteer coordinator who will assist the family members in identifying appropriate volunteer positions and in meeting their responsibilities. The volunteer coordin ator will track the family member's progress monthly and will meet with the family memberasneeded to be stencourage compliance.
- E. Thirty (30) days before the family's next lease anniversary date, the volunteer coordinator will advise the Housing Autho rity whether each applicable adult family member is in compliance with the community service requirement.

# 1.6 Notification of Non -compliance with Community Service Requirement

The Housing Authority will notify any family found to be innon compliance of the following:

- A. Thefamilymember(s)hasbeendeterminedtobeinnoncompliance;
- B. Thatthedeterminationissubjecttothegrievanceprocedure; and
- C. That, unless the family member(s) enter into an agreement to comply, thelease will not be renewed or will be terminated;

#### 1.7 Opportunity forcure

The Housing Authority will offer the family member (s) the opportunity to enter into an agreement prior to the anniversary of the lease. The agreement shall state that the family member (s) agrees to ente r into an economic self sufficiency program or agrees to contribute to community service for as many hours as needed to comply with the requirement over the past 12 -month period. The cure shall occur over the 12 -month period beginning with the date of the agreement and the resident shall at the same time stay current with that year's community service requirement. The first hours a resident earns goes toward the current commitment until the current year's commitment is made.

The volunteer coordinator will assist the family member in identifying volunteeropportunities and will track compliance on a monthly basis.

If any applicable family member does not accept the terms of the agreement, does not fulfill their obligation to participate in an economic self -sufficiency

\_\_\_\_\_

program, or falls behind in their obligation under the agreement to perform community service by more than three (3) hours after three (3) months, the HousingAuthorityshalltakeactiontoterminatethelease.

#### **StatusUpdate**

No longer requir ed by HUD to be implemented. Therefore the PHA has not continued to implement this policy.

#### Attachment G.

# STATEMENTOFPROGRES SOF AGENCYPLANGOALS

**Goal1:** Expandthesupplyofassistedhousing

**Result:** The Housing Aut hority applied for additional Section 8 units last year

and was unsuccessful in that round of funding. The Authority responded to the latest NOFA. for new units and awaits HUD response.

**Goal2:** Improve the quality of assisted housing.

**Result:** The Housing Authority continues with its most successful

modernizationprogram. The Authority has obtained aperfect PHAS in

allmodernizationareas.

Goal3: Provideanimprovedlivingenvironment.

**Result:** The Authority's PHDEP continues to successfully reduce cr iminal

activities at all family sites. PHDEP elimination will hurt.

**Goal4:** Promoteself -sufficiencyandassetdevelopmentofassistedhouseholds.

**Result:** The Authority continues its FSS program and provides successful

counselingforresidentstobecomes elf-sufficient.

**Goal5:** Ensure equal opportunity and affirmatively further fairhousing.

**Result:** The Authority runsits programs in complete compliance with all FHEO

mandates. Therehave been no FHEO finding sinthe pastyear.

### Attachment H.

# RESIDENTMEMBERSHIP OF THEPHAGOVERNINGBO ARD

The following are resident members of the PHAG overning Board:

LoisY.Lawson April,2006

### Attachment I.

#### MEMBERSHIPOFTHERE SIDENTADVISORYBOAR D

PamGilmore 1130HeckAve.Apt.1

GeraldLott 19DavisAve.Apt.48

LoisLawson 30RidgeCourtApt.3

CarolPoster 1104HeckAve.Apt.33

TerrySabatine 1804AlbertaAve.Apt.47

GladysDickerson 1603SixthAvenue,Apt.41

## Attachment J.

### REACFOLLOWUPPLAN

 $No REAC \ \ follow-up \ planwas requested this year by \quad \ HUD.$ 

# Attachment K.

## <u>P/EREPORT(2000CFP)</u> -03/31/2002

AnnualStatement/PerformanceandEvaluationReport										
Capi	italFundPrograman dCapitalFundProg	ramReplacemer	ntHousingFactor	r(CFP/CFPRHF)						
Part	I:Summary	_	_							
PHAN	· ·	GrantTypeandNumber CapitalFundProgramGrantNo: NJ39P048-501-00 ReplacementHousingFactorGrantNo: N/A								
		· \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	TG: 4	<b>#2</b> >	2000					
	ginalAnnualStatement		alStatement(revisionno formanceandEvaluatio	*						
Line	Summary by Development Account	TotalEstim	alCost							
No.				1						
		Original	Revised	Obligated	Expended					
1	Totalnon -CFPFunds	0	0	0	0					
2	1406Operations	0	0	0	0					
3	1408ManagementImprovementsSoftCosts	13,100	15,900	15,900	15,900					
	ManagementImprovementsHardCosts	0	0	0	0					
4	1410Administration	36,000	36,000	36,000	36,000					
5	1411Audit	0	0	0	0					
6	1415LiquidatedD amages	0	0	0	0					
7	1430FeesandCosts	42,600	42,600	42,600	28,400					
8	1440SiteAcquisition	0	0	0	0					
9	1450SiteImprovement	0	0	0	0					
10	1460DwellingStructures	405,744	419,532	419,532	419,532					
11	1465.1DwellingEquipment —Non-expendable	60,751	44,163	44,163	44,163					

	ualStatement/PerformanceandEvaluationtal	-	ntHousingFacto	r(CFP/CFPRHF)				
-	I:Summary	51 diliziopideeliie		(011/0111111)				
PHANa	·	GrantTypeandNumber CapitalFundProgramGrantNo: NJ39P048-501-00 ReplacementHousingFactorGrantNo: N/A						
					2000			
	ginalAnnualStatement ReserveforDisasters/Emerger formanceandEvaluatio nReportforPeriodEnding: 03/		ıalStatement(revisionn formanceandEvaluatio	*				
Line No.	SummarybyDevelopmentAccount	TotalEstin		TotalAct	ualCost			
12	1470NondwellingStructures	0	0	0	0			
13	1475NondwellingEquipment	24,085	24,085	24,085	24,085			
14	1485Demolition	0	0	0	21,003			
15	1490ReplacementReserve	0	0	0	0			
16	1492MovingtoWorkDemonstration	0	0	0	0			
17	1495.1RelocationCosts	0	0	0	0			
18	1499DevelopmentActivities	0	0	0	0			
19	1502Contingency	0	0	0	0			
	AmountofAnnualGrant:(sumoflines)	582,280	582,280	582,280	568,080			
	AmountoflineXXRelatedtoLBPActivities	0	0	0	0			
	AmountoflineXXRelatedtoSection504compli ance	0	0	0	0			
	AmountoflineXXRelatedtoSecurity –SoftCosts	0	0	0	0			
	AmountofLineXXrelatedtoSecurityHardCosts	0	0	0	0			
	AmountoflineXXRelatedtoEnergyConservation							
	Measures	0	0	0	0			
	CollateralizationExpensesorDebtService	0	0	0	0			

# AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartII:SupportingPages

PHAName:		GrantTypeandNum ber				FederalFYofGrant:			
NeptuneH	lousingAuthority	C	CapitalFundProgramGrantNo: NJ39P048-501-00				2000		
_		Re	ReplacementHousingFactorGrantNo: N/A						
Development	GeneralDescriptionofMajorWork		Dev.Acct	Quantity	TotalEstimatedCost		TotalActualCost		StatusofWork
Number	Categories		No.						
Name/HA-Wide							!		
Activities					OriginalRevised		Obligated Expended		
HAWide	ManagementImprovement		1408	N/A	13,100	15,900	15,900	15,900	Completed
HAWide	AdministrativeFees		1410	N/A	36,000	36,000	36,000	36,000	Completed
HAWide	ConsultantFees		1430.2	N/A	42,600	42,600	42,600	28,400	WorkinginProcess
HAWide	Appliances		1465.1	N/A	60,751	44,163	44,163	44,163	Completed
HAWide	OfficeEquipment		1475.1	N/A	24,085	24,085	24,085	24,085	Completed
				Subtotal	176,536	162,748	162,748	148,548	
NY48-6	Elevator		1460	100%	158,822	158,822	158,822	158,822	Completed
NY48-1	3CondensatePumps		1460	100%	10,012	10,012	10,012	10,012	Completed
NY48-3	HotWaterHeater		1460	100%	5,890	16,578	16,578	16,578	Completed
NY48-1	99/00/01:KitchenCabinets		1460	100%	231,020	231,020	231,020	231,020	Completed
HAWide	EmergencyMisc.Improvement		1460	N/A	0	3,100	3,100	3,100	Completed
				Subtotal	405,744	419,532	419,532	419,532	
				<b>7</b> 0 ( )	<b>500.0</b> 00	<b>500.000</b>	<b>500.000</b>	<b>E</b> (0, 000	
				Total	582,280	582,280	582,280	568,080	

#### AnnualStatement/PerformanceandEvaluationReport Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)PartIII:ImplementationSchedule PHAName: GrantTypeandNumber FederalFYofGrant: NeptuneHousingAuthority CapitalFundProgramNo: NJ39P048-501-00 2000 ReplacementHousingFactorNo: N/A DevelopmentNumber All FundObligated AllFundsExpended ReasonsforRevisedTargetDates Name/HA-Wide (QuarterEndingDate) (QuarterEndingDate) Activities Original Original Revised Revised Actual Actual 09/30/2003 03/31/2002 \*\*\*\* 03/31/2002 HAWide 03/31/2002 09/30/2003 NY48-1 \*\*\*\* 03/31/2002 NY48-3 03/31/2002 03/31/2002 09/30/2003 \*\*\*\* NY48-6 \*\*\*\* 03/31/2002 03/31/2002 09/30/2003

## Attachment L.

## **P/EREPORT( 2001CFP) -03/31/2002**

AnnualStatement/PerformanceandEvaluationReport										
CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF)										
Part	I:Summary									
PHAN		GrantTypeandNumber			Federal					
Nepti	uneHousingAuthority	CapitalFundProgramGra	antNo: <b>NJ39P048-5</b>	01-01	FYof Grant:					
		ReplacementHousingFac	ctorGrantNo: <b>N/A</b>		Grant.					
					2001					
	${\bf ginal Annual Statement  \Box Reserve for Disasters / Emerger}$		ualStatement(revisionno		·					
	i		formanceandEvaluatio							
Line										
No.				0.11						
		Original	Revised	Obligated	Expended					
1	Totalnon -CFPFunds	0	0	0	0					
2	1406Operations	0	0	0	0					
3	1408ManagementImprovementsSoftCosts	20,000	20,000	6,617	6,617					
	ManagementImprovementsHardCosts	0	0	0	0					
4	1410Administration	36,000	36,000	0	00					
5	1411Audit	0	0	0	0					
6	1415LiquidatedDamages	0	0	0	0					
7	1430FeesandCosts	68,000	121,713	78,007	44,887					
8	1440SiteAcquisition	0	0	0	0					
9	1450SiteImprovement	180,000	117,088	117,088	0					
10	1460Dwellin gStructures	244,084	253,283	167,203	135,203					
11	1465.1DwellingEquipment —Non-expendable	30,000	30,000	1,979	1,979					

	I:Summary	T -:			Federal			
PHANa Neptu	ame: uneHousingAuthority		GrantTypeandNumber CapitalFundProgramGrantNo: NJ39P048-501-01					
					2001			
	ginalAnnualStatement ReserveforDisasters/Emerge formanceandEvaluationReportforPeriodEnding: 03		atement(revisionno: #1 anceandEvaluationRepo	-/				
Line	SummarybyDevelopmentAccount	TotalEstimated	lCost	TotalActualCos	t			
No.	1470) 1 11' 0.	0	0	0				
12	1470NondwellingStructures	16,000	16,000	1565	(			
13 14	1475NondwellingEquipment 1485Demolition	10,000	16,000	1,565	(			
15	1490Replacemen tReserve	0	0	0	(			
16	1492MovingtoWorkDemonstration	0	0	0				
17	1495.1RelocationCosts	0	0	0				
18	1499DevelopmentActivities	0	0	0				
19	1502Contingency	0	0	0				
	Ç							
	AmountofAnnualGrant:(sumoflines)	594,084	594,084	372,459	188,686			
	AmountoflineXXRelatedtoLBPActivities	0	0	0	C			
	AmountoflineXXRelatedtoSection504compliance	0	0	0	(			
	AmountoflineXXRelatedtoSecurity –SoftCosts	0	0	0	(			
	AmountofLineXXrelatedtoSecurityHardCosts	0	0	0	(			
	AmountoflineXXR elatedtoEnergyConservation							
	Measures	0	0	0	C			
	CollateralizationExpensesorDebtService	0	0	0	(			

# $Annual Statement/Performance and Evaluation Report \\ Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) \\ Part II: Supporting Pages$

PHAName:		G	GrantTypeandNumber				FederalFYofGrant:			
NeptuneH	IousingAuthority	CapitalFundProgramGrantNo:			NJ39P048-501-01		2001			
_	·	ReplacementHousingFactorGrantNo: N/A								
Development GeneralDescriptionofMajorWork		Dev.Acct Quantity		Quantity	TotalEstimatedCost		TotalActualCost		StatusofWork	
Number	Categories		No.							
Name/HA-Wide										
Activities					OriginalRevise	ed	Obligated			
							Expended			
HAWide	ManagementImprovement		1408	N/A	20,000	20,000	6,617	6,617	Completed	
HAWide	AdministrativeFees		1410	N/A	36,000	36,000	0	0	PlanningPhase	
HAWide	A/EFees(01&02)		1430.1	N/A	25,000	79,113	78,007	44,887	WorkinginProcess	
HAWide	ConsultantFees		1430.2	N/A	43,000	42,600	0	0	PlanningPhase	
HAWide	Appliances		1465.1	N/A	30,000	30,000	1,979	1,979	WorkinginProcess	
HAWide	OfficeEquipment		1475.1	N/A	8,000	8,000	1,565	0	WorkinginProcess	
HAWide	MaintenanceEquipment		1475.2	N/A	8,000	8,000	0	0	PlanningPh ase	
				Subtotal	170,000	223,713	88,168	53,483		
NY48-1	99/00/01:KitchenUpgrade		1460	100%	165,265	135,203	135,203	135,203	Completed	
NY48-3	A:HandicappedKitchenUpgrade		1460	3Units	30,000	18,000	18,000	0	DesignPhase	
NY48-1	A:Handicapp edKitchenUpgrade		1460	1Unit	10,000	7,000	7,000	0	DesignPhase	
NY48-5	A:HandicappedKitchenUpgrade		1460	1Unit	10,000	7,000	7,000	0	DesignPhase	
NY48-1	ExteriorPainting		1460	100%	28,819	0	0	0	PriorityChanged	
NY48-1	SiteImprovement(Concrete)		1450	100%	30,000	0	0	0	PriorityChanged	
NY48-2	SiteImprovement(Concrete)		1450	100%	30,000	0	0	0	PriorityChanged	
NY48-3	SiteImprovement(Concrete)		1450	100%	30,000	0	0	0	PriorityChanged	
NY48-4	SiteImprovement(Concrete)		1450	100%	30,000	0	0	0	PriorityChanged	
NY48-5	SiteImprovement(Concrete)		1450	100%	30,000	0	0	0	PriorityChanged	
NY48-6	SiteImprovement(Concrete)		1450	100%	30,000	0	0	0	PriorityChanged	
NY48-5	B:Steps(Front&Back)		1450	100%	0	117,088	117,088	0	DesignPhase	

# $Annual Statement/Performance and Evaluation Report \\ Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) \\ Part II: Supporting Pages$

PHAName:		G	GrantTypeandNumber					FederalFYofGrant:		
NeptuneH	<b>IousingAuthority</b>	C	CapitalFundProgramGrantNo: NJ39P048-501-01 ReplacementHousingFactorGrantNo: N/A					2001		
-	·	Re								
Development Number Name/HA-Wide Activities	GeneralDescriptionofMajorWork Categories		Dev.Acct No.	Quantity	TotalEstim OriginalRevise		TotalActualCost Obligated		StatusofWork	
HAWide	02:KitchenUpgrade		1460	Partial	0	86,080	Expended 0	0	PlanningPhase	
111111100	oz.menene pgrade		1100	Subtotal	424,084	370,371	284,291	135,203	T idining nase	
				Total	594,084	594,084	372,459	188,686		
				Total	374,004	374,004	312,439	100,000		
		-								

#### AnnualStatement/PerformanceandEvaluationReport CapitalFundProgramandCapitalFundProgramReplacementHousingFactor(CFP/CFPRHF) PartIII:ImplementationSchedule PHAName: GrantTypeandNumber FederalFYofGrant: ${\it Capital Fund Program No:} \quad \textbf{NJ39P048-501-01}$ **Neptune HousingAuthority** 2001 ReplacementHousingFactorNo: N/A DevelopmentNumber AllFundObligated AllFundsExpended ReasonsforRevisedTargetDates Name/HA-Wide (QuarterEndingDate) (QuarterEndingDate) Activities Original Revised Original Revised Actual Actual 03/31/2003 09/30/2004 **HAWide** NY48-1 03/31/2003 09/30/2004 NY48-2 03/31/2003 09/30/2004 03/31/2003 NY48-3 09/30/2004 NY48-4 03/31/2003 09/30/2004 NY48-5 03/31/2003 09/30/2004 NY48-6 03/31/2003 09/30/2004